From:
 Stannard, Paula (HHS/IOS)

 Sent:
 26 Aug 2017 01:21:09 +0000

 To:
 Stannard, Paula (HHS/IOS)

Subject:068t0000000r5LyAAI ps edits.docxAttachments:068t0000000r5LyAAI ps edits.docx

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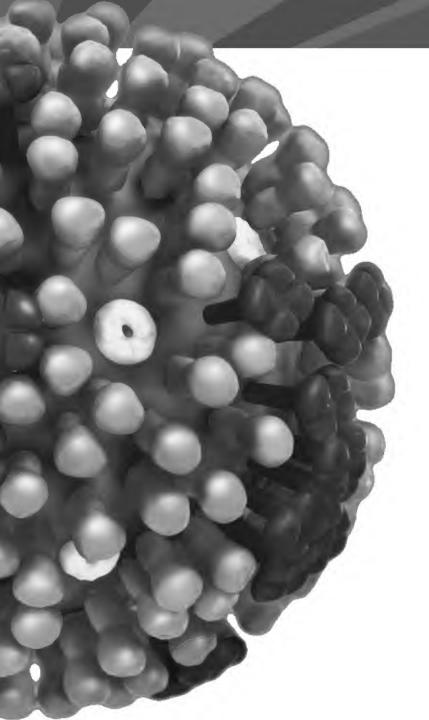
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C	Tignor, Beth (HHS/IOS) on behalf of Secretary Scheduler (OS/IOS)
Sent: To:	6 Feb 2018 20:30:07 +0000 AMA2! (OS/IOS);Harrison, Brian (HHS/IOS);Martinez, Cecilia
	Carolyn (OS/IOS);Skrzycki, Kristin (HHS/IOS);Tignor, Beth (HHS/IOS);Twomey,
	L);Urbanowicz, Peter (HHS/IOS);Kadlec, Robert (OS/ASPR/IO);Schuchat, Anne
	nuci, Anthony (NIH/NIAID) [E];Wright, Don (HHS/OASH);Lapinski, Mary-Sumpter
	ard, Paula (HHS/IOS);Agnew, Ann (HHS/IOS);Smith, Christopher
	tlieb, Scott (FDA);EDH (OS/IOS);Adams, Jerome (HHS/OASH);Grigsby, Garrett
	Brennan, Patrick (OS/ASPA);Caliguiri, Laura (HHS/IOS)
Cc:	Wolfe, Mitchell (CDC/OD/CDCWO);Berger, Sherri
);Tabak, Lawrence (NIH/OD) [E];Meekins, Chris (OS/ASPR/IO);Pelekoudas,
	S);Horska, Katerina (HHS/IOS);Pennington, Caitlin (FDA/OC);Peacock, Jessica
	Callahan, Kenneth (HHS/IOS);Brady, Will (HHS/IOS);Moreno, Rafael
	er, Charles (HHS/IOS)
Subject:	AMA at Flu Briefing, CDC, NAID, NIH, ASPR
Attachments:	Influenza Briefing_Slides.pptx, ASPR Secretary Briefing Memo-Influenza
Situation Report	cm.docx, Secretary Cover Memo Template_Influenza Briefing msl.docx
x x x	
	Hi all,
)(5)	
)(3)	

Best,

Mary-Sumpter





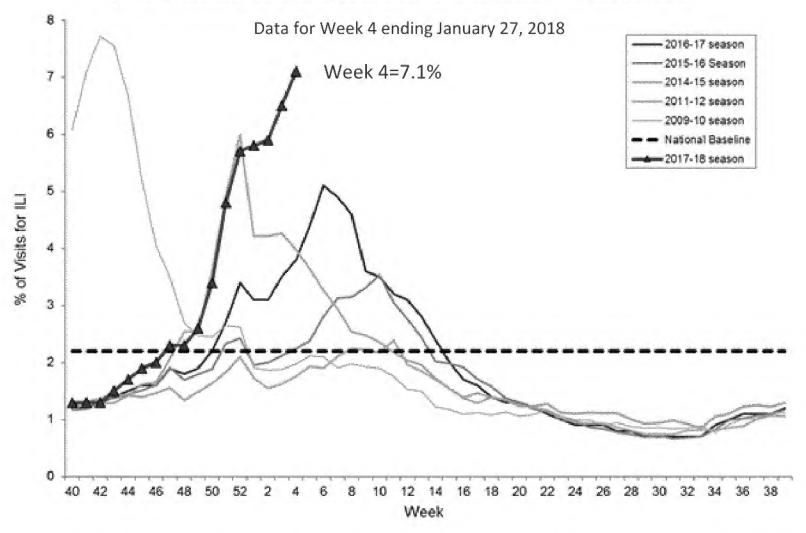
Influenza Update

Anne Schuchat, MD (RADM, USPHS)
Acting Director, CDC

February 7, 2018



Percentage of Visits for Influenza-like Illness (ILI) Reported by the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet), Weekly National Summary, 2017-2018 and Selected Previous Seasons



Influenza-like illness activity in ambulatory care settings rose again in Week 4

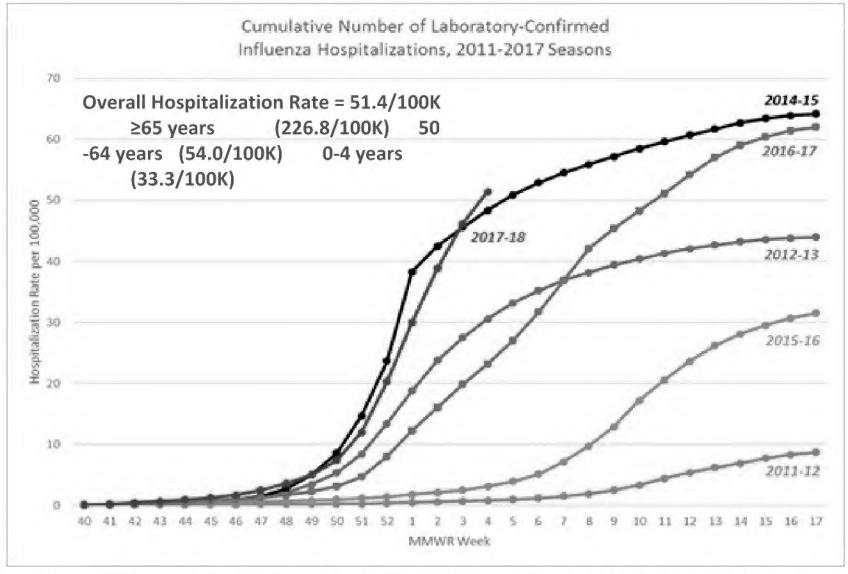


Overall, influenza-like illness (ILI) activity is higher in more states for week 4, ending January 27, 2018.42 states, New York City and the District of Columbia experiencing high ILI activity 49 states and Puerto Rico are reporting widespread geographic activity





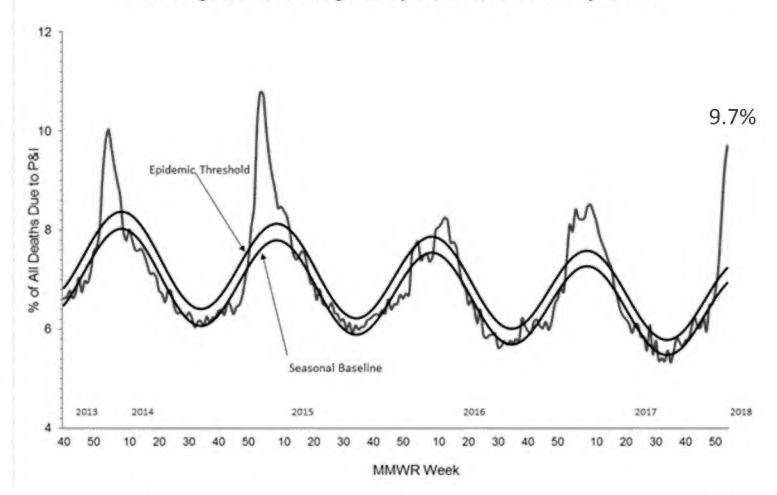




The cumulative hospitalization rate (all ages) has surpassed the 2014-15 season; a "high" severity season with an estimated 710,000 hospitalizations.



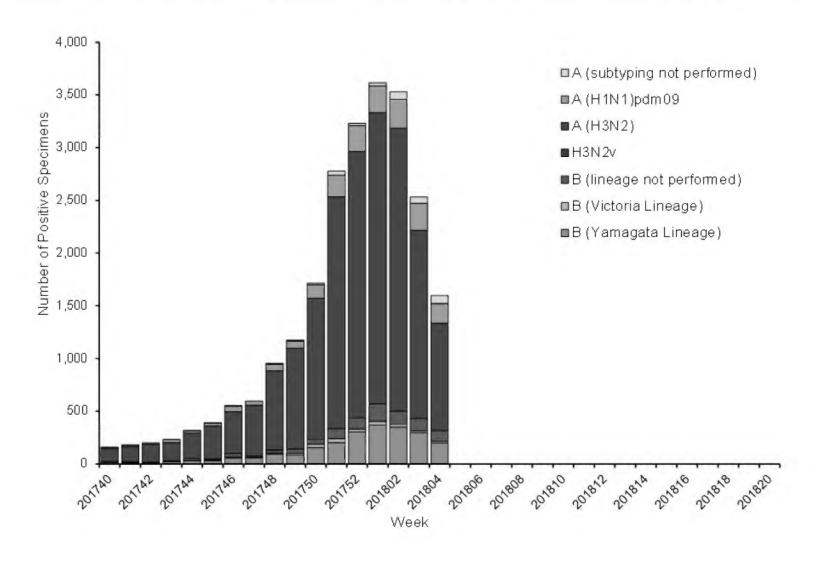
Pneumonia and Influenza Mortality from the National Center for Health Statistics Mortality Surveillance System Data through the week ending January 13, 2018, as of February 1, 2018



Death certificate monitoring shows rapid increase in pneumonia and influenza deaths, looking like past H3N2 season in 2014-15.



Reported to CDC from tests conducted in US Public Health Laboratories, 2017-18

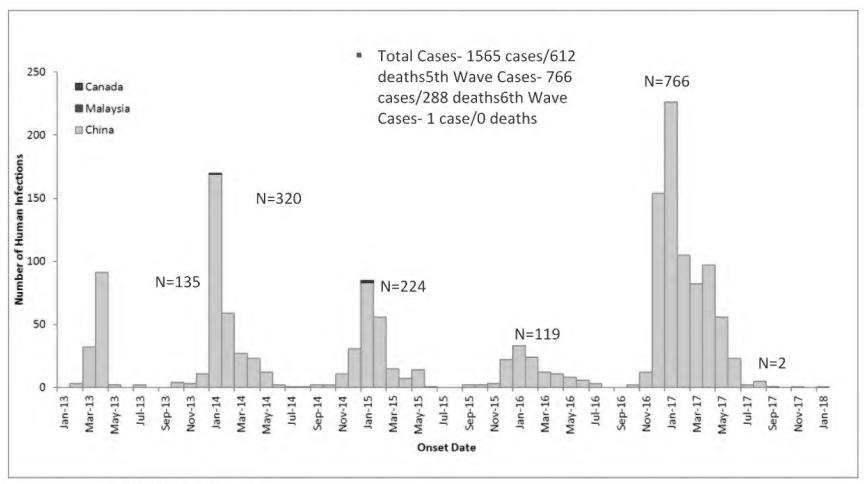




Influenza A(H3N2) viruses are predominating; usually associated with more severe illness.Influenza-like illness (ILI) is now higher than ILI during 2014-2015 season ILI is higher than it was at the peak of 2014-2015 (7.1% versus 6%). This is the highest ILI percentage recorded during a regular flu season since 2003-2004 which peaked at 7.6%. The cumulative hospitalization rate is now higher than what was reported during the same week in 2014-2015 (H3N2 predominant season) categorized as "high severity". Pneumonia and influenza deaths are above the epidemic threshold but below what was observed during 2014-2015; however, the number of deaths is expected to rise again this week. An estimated 56,000 people died during 2014-2015. Vaccine Effectiveness against H3N2 viruses during seasons when no antigenic drift has occurred may, in part, be lower due to egg-adapted changes.

Worsening 5th Wave of Human Infection H7N9 in China Influenza

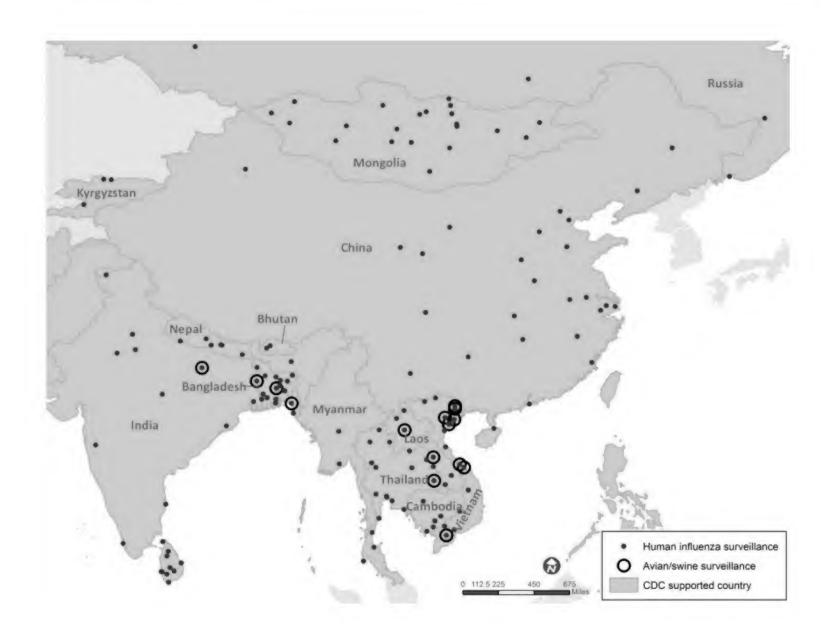




^{*}Date of onset missing for 6 case-patients







H7N9 Situation as of February 2018: Summary



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The Role of the National Institute of Allergy and Infectious Diseases in Research Addressing Seasonal and Pandemic Influenza

Anthony S. Fauci, M.D.

Director

National Institute of Allergy and Infectious Diseases

National Institutes of Health

February 7, 2018





Current seasonal influenza vaccines are not consistently effective

Pandemics do occur and response after the fact is not effective

"Chasing after" potential pandemic outbreaks (pre-pandemic viruses) is costly and ineffective Current seasonal influenza vaccines are not consistently effective

Pandemics do occur and response after the fact is not effective

"Chasing after" potential pandemic outbreaks (pre-pandemic viruses) is costly and ineffective

Adjusted Vaccine Effectiveness Estimates for Influenza Seasons from 2005-2017

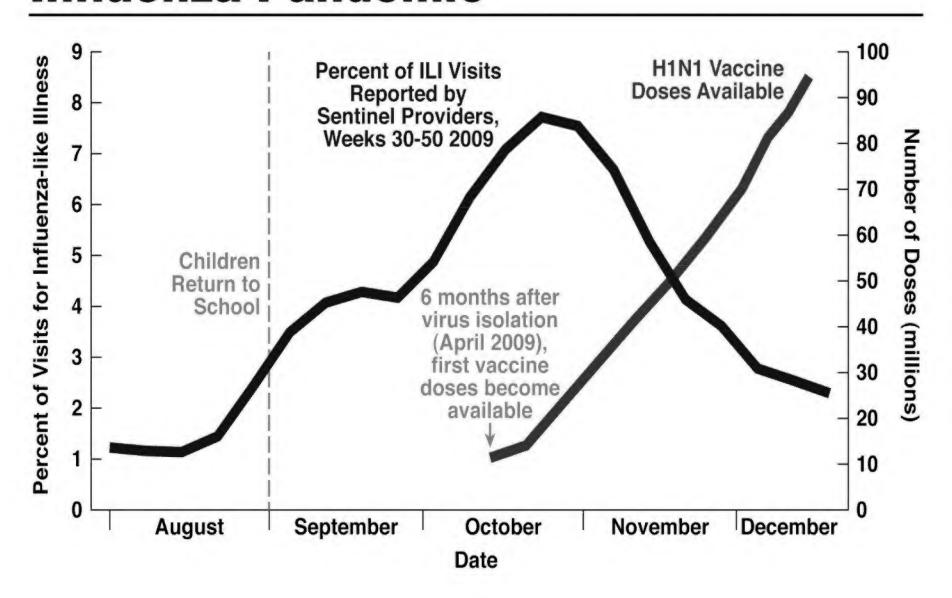


Current seasonal influenza vaccines are not consistently effective

Pandemics do occur and response after the fact is not effective

"Chasing after" potential pandemic outbreaks (pre-pandemic viruses) is costly and ineffective

Vaccine Lags Behind 2009 H1N1 Influenza Pandemic



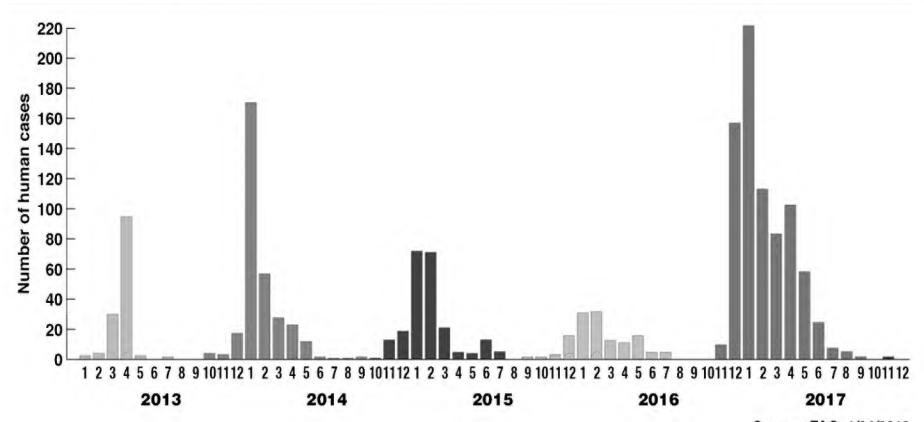
Current seasonal influenza vaccines are not consistently effective

Pandemics do occur and response after the fact is not effective

"Chasing after" potential pandemic outbreaks (pre-pandemic viruses) is costly and ineffective

Waves of Human H7N9 Influenza Infections in China, February 2013-present

- 1,624 confirmed human cases, 621 deaths
- 5th wave: >50% of cumulative cases



Source: FAO, 1/24/2018

Major Challenges in Influenza Vaccinology

Production of vaccines – Egg-based versus Cell-based versus Recombinant DNA Technology

Strain-Specificity versus Universal Strain Coverage

Major Challenges in Influenza Vaccinology

Production of vaccines – Egg-based versus Cell-based versus Recombinant DNA Technology

Strain-Specificity versus Universal Strain Coverage

Seasonal Influenza Vaccine Development

February/March

April - July

August - September



Virus Selection (WHO, FDA)



Production Testing Filling/Packaging



Product Release/ Shipping

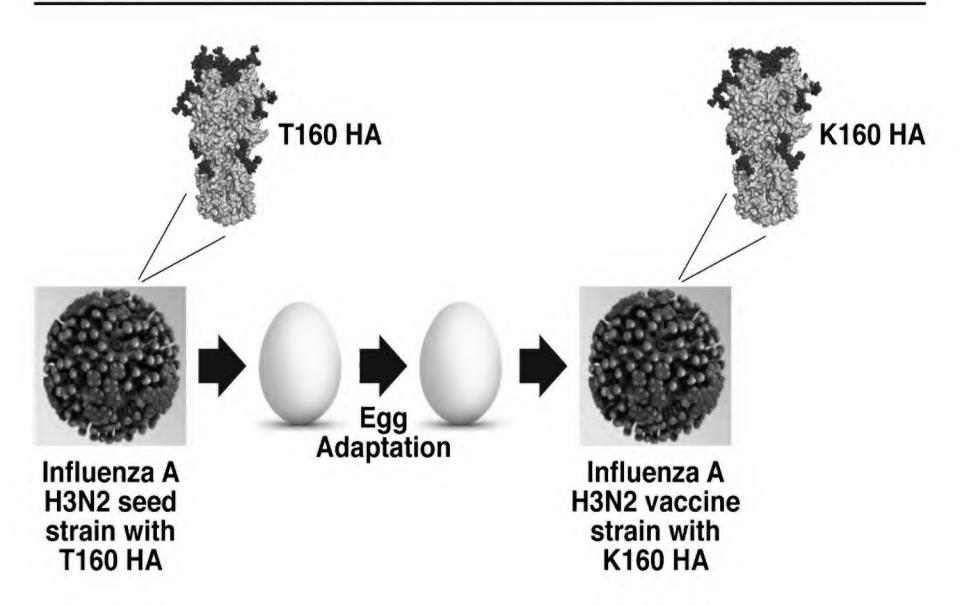


Immunity develops approximately 2 weeks after vaccination

Vaccination

Begins

Egg Adaptation of Influenza A H3N2 May Contribute to Decreased Vaccine Effectiveness



Evolution of Technologies for Influenza Vaccines

Egg-based Cell-based DNA
Technologies



Volume 378

January 4, 2018

Number

Chasing Seasonal Influenza — The Need for a Universal Influenza Vaccine

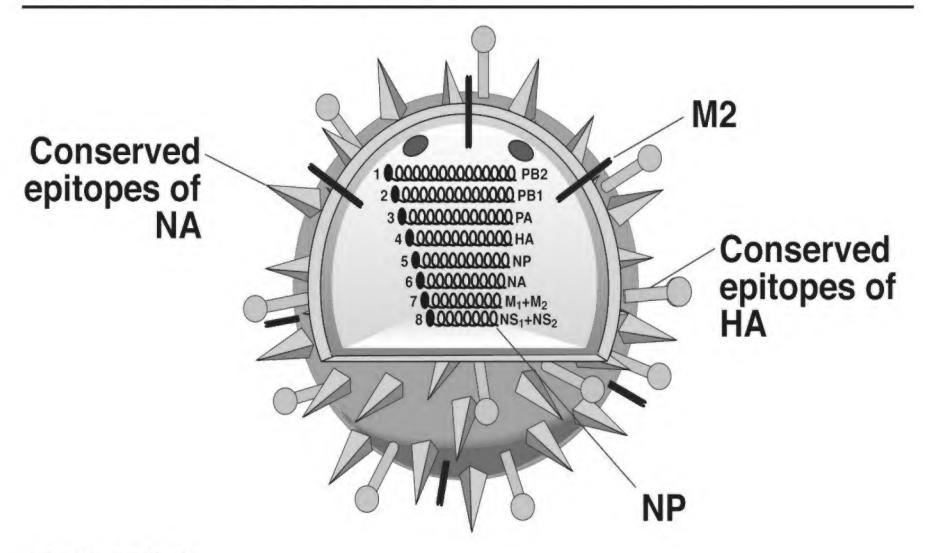
CI Paules, SG Sullivan, K Subbarao, and AS Fauci

Major Challenges in Influenza Vaccinology

Production of vaccines – Egg-based versus Cell-based versus Recombinant DNA Technology

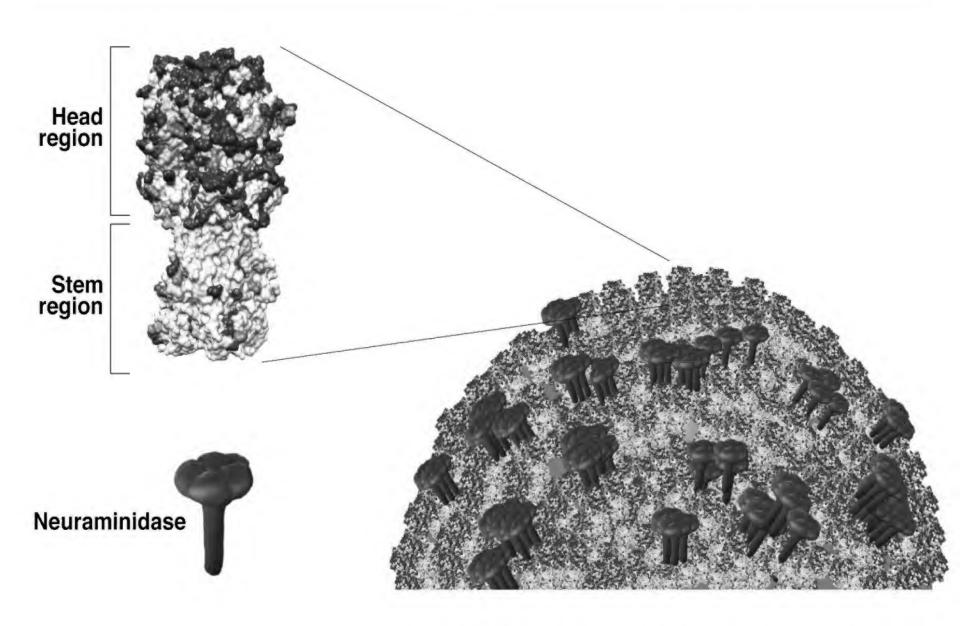
Strain-Specificity versus Universal Strain Coverage

Selected Targets for "Universal" Influenza Vaccines



Source: Subbarao/Murphy

Influenza A Hemagglutinin (HA)







The Pathway to a Universal Influenza Vaccine

CI Paules, HD Marston, RW Eisinger, D Baltimore, AS Fauci





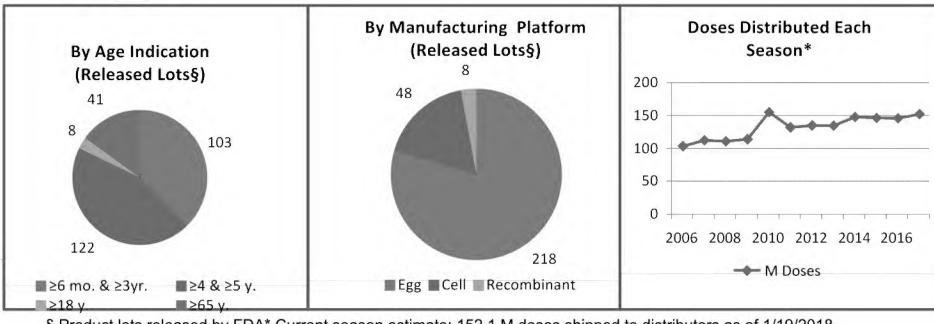
Assistant Secretary for Preparedness and Response Seasonal Influenza and H7N9 **Updates**







2017 – 18 Influenza Season Vaccine Supply: US



§ Product lots released by FDA* Current season estimate: 152.1 M doses shipped to distributors as of 1/19/2018

Estimates of vaccine effectiveness (VE) in Canada published in Eurosurveillance
 on 2/1/18VE against H3N2 viruses was 17% in all ages and 10% in adults 20–64

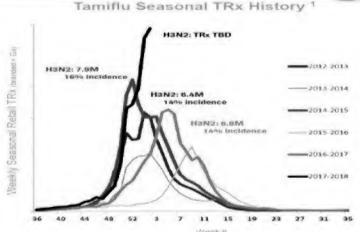






Influenza Antiviral Drugs

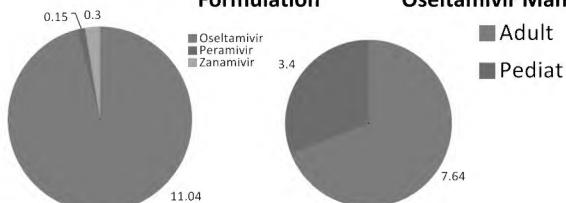
 2017-18 season continues to trend upward2014: ~8.5 (per discussion with CDC)11.04 million total treatment
 Commercial inventory as of 2/2/2018 Week 3 of 2017

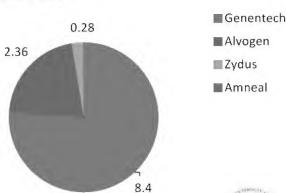


Graph courtesy of A. Patel CDC

Oseltamivir

Total US Inventory (millions) (02/2/18)Antivirals Formulation Oseltamivir Manufacturers







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2017-18 Influenza **Diagnostics Supply**

02-02-2018



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NOTE: Per CDC guidelines, testing is not required for antiviral

Sources: Media reports; FDA, CDC and BARDA calls with

manufacturers. For Official Use Only (FOUO)





Approaches to Improve Influenza Vaccine

Egg based Vaccines:86% of the QIV influenza vaccine supply is produced by growing each of the 4 viruses in eggsWhen a new strain of H3N2 virus is used in the vaccine, it must be first "adapted" to growth in eggs to improve the yield of vaccine. This adaption induces antibodies that do not recognize the original virus circulating in the human population. Solutions: Remove eggs from the manufacturing processSynthetic (non egg based) seedsExpand domestic capacity of non-egg based manufacturing approachesRecombinant Cell based Assess improved efficacy of non-egg based manufacturing approaches Assess benefit of adjuvants on vaccine efficacy







H7N9 5th Wave Vaccine

Since 2013: 1,564 cases (~35% mortality reported) 5th wave: 766 cases (288 deaths)<5% of cases caused by Pearl River Delta 2013 lineage >95% of cases caused by new Yangtze River Delta lineageYangtze River Delta Lineage acquired new virulence markersHigh pathogenicity in poultry (lethal in chickens)Antigenically drifted relative to 2013 vaccine strainStockpiled 2013 H7N9 vaccine is suboptimal/ineffectiveWHO recommended use of new strain for vaccine productionCDC IRAT scores highest since 2013Higher risk for pandemicGreater impact on public healthDecision to stockpile 5th wave H7N9 vaccine







Estimated Gap for Vaccine Preparedness Goal

 Vaccine Preparedness Goal: Target goal is 52M doses (two-dose vaccination regimen) based on CDC revised estimates of 26M Tier 1 individuals Gap:

Countermeasure	Gap for 52M (M)
Vaccine antigen	22
MF59 Adjuvant	27
AS03 Adjuvant*	24
Syringes and supplies	42.2

^{*}Filling only

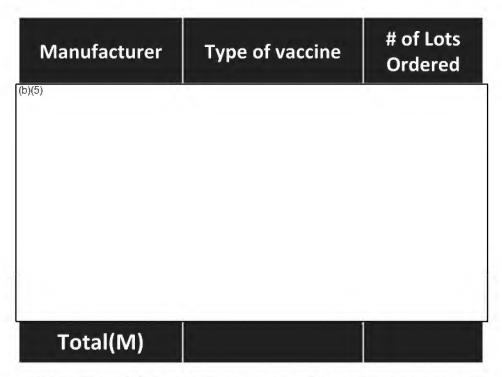






H7N9 Preparedness Bulk Antigen Estimates (5th Wave)

Preparedness Actions to Date:



*Clinical lot only**For stability testing only***seed development only







H7N9 Pre-Pandemic Vaccine Antigen Stockpile

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*NIH to conduct clinical trials as soon as vaccine is available







BARDA Flu Related Products in Development*

Company	Countermeasure
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Recombinant Influenza Vaccine

 Influenza HA gene is inserted into baculovirusInsect cells are infected with recombinant baculovirus, and HA protein is subsequently purified Process does not utilize/rely on eggs at any step.Potential for faster manufacturing than egg based approaches, which is important in a pandemic situationCurrently two licensed products, FluBlok and FluBlok Quadrivalentlicensed by Protein Sciences, which has since been bought by Sanofi PasteurLicensed for 18 and aboveSlightly shorter shelf life than other vaccines

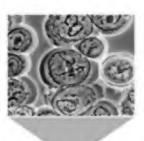




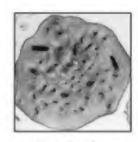


BEVS Technology

Baculovirus Expression Vector System (BEVS) Technology



Vaccine prepared within 2 months



Baculovirus

 Engineer to express recombinant protein under powerful promoter



expresSF+* cells

- · Infect cells in fermenter
- · Low-cost serum-free media



Pure protein

- Purify protein
- Formulate with PBS into vaccine







Office of the Secretary

Washington, D.C. 20201

DATE: February 6, 2018

TO: The Secretary

FROM: Robert Kadlec, M.D.

Assistant Secretary for Preparedness and Response

SUBJECT: Informational Briefing Memo - Influenza

This memo serves to provide a brief description of the current flu season and highlight key issues prior to a briefing occurring Wednesday, February 7.

Seasonal Influenza Update

Bottom line up front: By week 10 of the current flu season (CDC data provided through 1/27/2018), there are high hospitalizations, increasing deaths, and widespread activity, mainly due to H3N2 influenza which usually is associated with lower vaccine effectiveness compared with H1N1 or B influenza. Flu seasons can last 11-20 weeks and most indicators have not begun to improve. Vaccine effectiveness results from the US should be released later this month.

- Current season epidemiologic situation to date (as of 1/27/2018)
 - Surveillance indicators suggest the season has similar severity to 2014/15, when drifted H3N2 influenza strains circulated. There is no evidence of 'drift' among the circulating strains.
 - The total pediatric deaths for the season is 53. During the most recent high severity season,
 2014-15, the total pediatric deaths numbered 171.
 - Deaths due to pneumonia and influenza on death certificates have increased sharply in the last 2 weeks. The level (9.7%) is approaching, and likely will exceed, the peak of a recent high severity season in 2014-15 of 10.8%
 - The percent of patients with influenza like illness coming in to doctor's offices and emergency departments continues to increase and is now 7.1%, the highest flu activity since 2009 which peaked at 7.7%.
 - Influenza associated hospitalizations (51.4/100,000) are the highest since we began tracking this closely in 2010. The rates are highest among those 65 years and older, followed by those 50-64, and then 0-4 years old.
 - Geographic spread: 48 states are still reporting widespread flu activity (widespread means that more than half of the regions of the state had outbreaks and case of flu). Some states in the western part of the country are beginning to see declining flu activity, the eastern part of the country is seeing somewhat higher activity, and southern states are still continuing to see high activity.

Current vaccine effectiveness estimates (subject to change): Next week, CDC will be reporting out its	
interim season vaccine effectiveness estimates. (b)(5)	
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- Vaccine doses and vaccine coverage: As of January 12, more than 152 million doses of flu vaccine
 had been shipped nationwide. Midseason vaccine coverage was generally similar to past years,
 higher in children and the elderly than in adults <65 years of age.
- Antivirals: CDC is in regular contact with influenza antiviral manufacturers regarding supply and
 other issues. Some manufacturers are reporting delays in filling orders and CDC is aware of spot
 shortages of antiviral drugs, specifically generic versions of oseltamivir capsules and suspension due
 to high influenza activity experienced simultaneously around the country. CDC is working with
 manufacturers, distributors, and pharmacy partners including pharmacy benefit managers, to address
 existing gaps in the market and increase access to these drugs.
- Saline: ASPR's Critical Infrastructure Protection team is receiving continued reports from hospitals
 concerned about saline availability and flu volume. Per FDA, there is now an official
 nationwide shortage of sterile water products- both small and large volumes- mainly due to increased
 demand as a saline alternative for injection. Manufacturing issues in

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The National Vaccine Program Office's National Vaccine Advisory Committee, under the Office of the Assistant Secretary for Health is meeting February 7-8. On February 7, speakers from BARDA and NIH will discuss next generation influenza vaccine development, and on February 8, CDC will present an update on the current influenza season. On February 8 there will also be several presentations on disparities in immunization coverage, including racial disparities in influenza vaccine coverage.

The Office of the Surgeon General, OASH, is also well positioned to disseminate HHS messages about influenza and influenza vaccine through its leadership of the Commissioned Corps of the U.S. Public Health Service in collaboration with the Regional Health Administrators. As the Nation's Doctor, the

Surgeon General communicates the science around health and has unique standing with the American public as a trusted voice on health related issues. The Surgeon General is planning media outreach and will issue statements on steps individuals can take to protect themselves and their families from the flu. For example, the Surgeon General has authored a blog focused on providers.

H7N9 Update

<u>Bottom line up front:</u> H7N9 in China remains a global health threat. While China has previously provided some samples to the CDC; in recent years samples are difficult to acquire. The Secretary may be requested to urge China to provide the eight samples requested by the CDC.

Influenza A (H7N9) continues to be a global public health threat since it emerged in 2013 in people in China. As with all influenza viruses which are constantly changing, it is important to monitor the evolution of H7N9 strains, assess their threat, and develop candidate medical countermeasures to ensure global preparedness capabilities. The Department needs access to contemporary H7N9 viruses that reflect the diversity of viruses currently circulating among birds and people in China. The U.S. CDC received H7N9 viruses from China in 2013 when the virus first emerged and HHS developed and stockpiled prepandemic H7N9 vaccine to these strains. In 2017, CDC received a total of five H7N9 viruses from Hong Kong and Taiwan and one virus from mainland China. However, the U.S. CDC has encountered difficulties in accessing additional H7N9 viruses from mainland China over the last three years, despite the willingness and cooperation of the China CDC to respond to requests for viruses. HHS, State, and Embassy Beijing have attributed the delays in sharing viruses to administrative and regulatory requirements implemented by the Chinese Ministry of Commerce (MOFCOM). After efforts by the U.S. Government to engage China at the technical and diplomatic levels earlier this year, including a letter from Secretary Price to Chinese Minister of Health Li, CDC received one H7N9 virus in April 2017. However, the 2017 revelation of circulating H7N9 viruses in China that are distinct from earlier H7N9 virus strains and existing candidate vaccine viruses (CVV) has rendered the U.S. stockpiled 2013 H7N9 vaccines suboptimal. Therefore, HHS has developed a new pre-pandemic H7N9 vaccine. CDC has evaluated the CVV against the available 2017 H7N9 viruses, but needs additional 2017 viruses to evaluate better the breadth of protection against H7N9 viruses circulating in China.

The U.S. CDC's request in June 2017 for eight H7N9 viruses from the most recent outbreak in China is still awaiting approval from various Chinese government institutions before the viruses can be exported. Since February 2017, HHS has increased its engagement with its Ministry counterparts in China to both encourage and better understand China's policy, procedures, and timeline for virus sharing. The White House's Homeland Security Advisor and National Security Council have been engaged in this bilateral issue including most recently requesting that U.S. Ambassador to China Terry Brandstad meet with MOFCOM and the China CDC on this issue. HHS/OGA and the White House will also be meeting this week with the U.S. Deputy Chief of Mission in China, who has a strong relationship with MOFCOM, to discuss this issue.





DEPARTMENT OF HEALTH & HUMAN SERVICES

To: Secretary Alex M. Azar II

Through: Paula Stannard

From: Dr. Robert Kadlec

Subject: Influenza Briefing

Date: Wednesday, February 7, 2018

Event Details:

Date: Wednesday, February 8, 2018

Time: 5:10-6:00pm

Location: Room 610-F, Humphrey Building

Call: None

HHS Staff: Dr. Schuchat, Dr. Fauci, Dr. Kadlec, Dr. Wright, Dr. Jerome Adams, Dr. Scott Gottlieb,

Garrett Grigsby

Press: No

Who requested this event:

Office of the Secretary

Topic:

Discuss the current influenza season, and briefly discuss H7N9 samples.

Objective:

For HHS components and the Secretary to discuss the current influenza season and next steps.

List of Attendees/Participants:

Dr. Anne Schuchat

Dr. Anthony Fauci

Dr. Robert Kadlec

Dr. Donald Wright

Dr. Jerome Adams

Dr. Peter Marks

Garrett Grigsby

Meeting / Event Agenda:

5:10 Welcome & Overview

5:10-5:23 Dr. Schuchat

5:23-5:35 Dr. Fauci

5:30-5:40 Dr. Kadlec

5:40-5:45 Dr. Wright, Dr. Adams, Dr. Marks, Garrett Grigsby





5:45-5:50 H7N9 Sample Update 5:50-6:00 Closing Comments & Action Items

Background:

By week 10 of the current flu season (through 1/27/2018), there are high hospitalizations, increasing deaths, and widespread activity, mainly due to H3N2 influenza which usually is associated with lower vaccine effectiveness compared with H1N1 or B influenza. Flu seasons can last 11-20 weeks and most indicators have not begun to improve. Vaccine effectiveness results from the US should be released later this month.

Attachments:

- 1. Situation Report Memo
- 2. Slides

From: Policy Briefings Scheduler (OS/IOS)
Sent: 14 Aug 2017 17:52:38 +0000

To: Stannard, Paula (HHS/IOS);Lapinski, Mary-Sumpter (HHS/IOS);Wynne,

Maggie (HHS/IOS);Brooks, John (HHS/IOS);Bell, Kathryn (HHS/IOS);Caliguiri, Laura (HHS/IOS);Agnew, Ann (HHS/IOS);Malliou, Ekaterini (OS/IOS);Korch, George

(OS/ASPR/IO);Gabriel, Edward (OS/ASPR/IO);Meekins, Chris (OS/ASPR/IO);Flick, Heather

(OS/OGC); Moughalian, Jen (HHS/ASFR); Cochran, Norris (HHS/ASFR); Abram, Anna (FDA/OC); Kalavritinos, Jack (FDA/OC); Ford-Barnes, Arwenthia (HHS/ASPR/IO)

Cc: Meckes, Madeline (OS/ASPR/COO) (CTR);Robinson, Wilma

(HHS/IOS); Hawkins, Jamar (HHS/OS); Bowles, Jamil (HHS/IOS); Stimson, Brian

(HHS/OGC);Bowman, Matthew (HHS/OGC);Stephan, Briana (OS/ASPR/IO);Moss, Marcille

(OS/ASPR/IO); Pence, Laura (HHS/IOS); Kemper, Laura (HHS/ASL)

Subject: ASPR Briefing for Policy Team - [MATERIALS ATTACHED]

Attachments: Agenda_ASPR Brief to OS Policy Team 8_16.docx, ASPR Week Ahead

Report 08.02.17.docx, OEM Policy Brief on exercises and real world events.pptx, PBS

Investmenst Final Draft.pptx, Update Operation DOWNPOUR v3.pptx



<u>Purpose</u>: Continuation meeting with Counselors. Please contact Dr. Ekaterini Malliou should you have any questions.

Meeting Participants:

Counselors: Paula Stannard, Mary-Sumpter Lapinski, Maggie Wynne, John Brooks, Kathryn Bell

Deputy Secretary's Office: Laura Caliguiri Exec Sec: Ann Agnew, Ekaterini (Kat) Malliou ASPR: George Koch, Edward Gabriel, Chris Meekins

OGC: Heather Flick

ASFR: Jen Moughalian, Norris Cochran

FDA: Anna Abram – via phone; Jack Kalavritinos – via phone

Location: Exec Sec Conf Rm 614H; (b)(6) Passcode (b)(6) Leader Code (b)(6)

Contact: Dr. Ekaterini (Kat) Malliou at Ekaterini.Malliou@hhs.gov; 202-690-6875

Page 100
Withheld pursuant to exemption
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of the Freedom of Information Act

Withheld pursuant to exemption

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From: Policy Briefings Scheduler (OS/IOS)
Sent: 21 Aug 2017 15:06:38 +0000

To: Policy Briefings Scheduler (OS/IOS);Stannard, Paula (HHS/IOS);Lapinski, Mary-Sumpter (HHS/IOS);Wynne, Maggie (HHS/IOS);Brooks, John (HHS/IOS);Bell, Kathryn (HHS/IOS);Caliguiri, Laura (HHS/IOS);Agnew, Ann (HHS/IOS);Malliou, Ekaterini (OS/IOS);Gabriel, Edward (OS/ASPR/IO);Meekins, Chris (OS/ASPR/IO);Flick, Heather (OS/OGC);Moughalian, Jen (HHS/ASFR);Cochran, Norris (HHS/ASFR);Abram, Anna (FDA/OC);Kalavritinos, Jack (FDA/OC);Ford-Barnes, Arwenthia (HHS/ASPR/IO);Kadlec, Robert (OS/ASPR/IO)

Cc: Robinson, Wilma (HHS/IOS);Hawkins, Jamar (HHS/OS);Bowles, Jamil (HHS/IOS);Stimson, Brian (HHS/OGC);Bowman, Matthew (HHS/OGC);Stephan, Briana (OS/ASPR/IO);Moss, Marcille (OS/ASPR);Pence, Laura (HHS/IOS);Kemper, Laura (HHS/ASL)

Subject: ASPR Briefing for Policy Team

Attachments: Untitled, Untitled

<u>Purpose</u>: Continuation meeting with Counselors. Please contact Dr. Ekaterini Malliou should you have any questions.

Meeting Participants:

Counselors: Paula Stannard, Mary-Sumpter Lapinski, Maggie Wynne, John Brooks, Kathryn Bell

Deputy Secretary's Office: Laura Caliguiri Exec Sec: Ann Agnew, Ekaterini (Kat) Malliou

ASPR: Edward Gabriel, Chris Meekins, Robert Kadlec

OGC: Heather Flick

ASFR: Jen Moughalian, Norris Cochran

FDA: Anna Abram – via phone; Jack Kalavritinos – via phone

<u>Location</u>: Exec Sec Conf Rm 614H; (b)(6) Passcode (b)(6), Leader Code (b)(6)

Contact: Dr. Ekaterini (Kat) Malliou at Ekaterini.Malliou@hhs.gov; 202-690-6875

Sent: 28 Jun 2018 10:50:59 +0000

To: Policy Briefings Scheduler (OS/IOS);Stannard, Paula (HHS/IOS);Lapinski, Mary-Sumpter (HHS/IOS);Wynne, Maggie (HHS/IOS);Brooks, John (HHS/IOS);Bell, Kathryn (HHS/IOS);Caliguiri, Laura (HHS/IOS);Agnew, Ann (HHS/IOS);Malliou, Ekaterini (OS/IOS);Korch, George (OS/ASPR/IO);Gabriel, Edward (OS/ASPR/IO);Meekins, Chris (OS/ASPR/IO);Flick, Heather (OS/OGC);Moughalian, Jen (HHS/ASFR);Cochran, Norris (HHS/ASFR);Abram, Anna (FDA/OC);Kalavritinos, Jack (FDA/OC);Ford-Barnes, Arwenthia (HHS/ASPR/IO)

Cc: Meckes, Madeline (OS/ASPR/COO) (CTR);Robinson, Wilma (HHS/IOS);Hawkins, Jamar (HHS/OS);Bowles, Jamil (HHS/IOS);Stimson, Brian (HHS/OGC);Bowman, Matthew (HHS/OGC);Stephan, Briana (OS/ASPR/IO);Moss, Marcille

(OS/ASPR/IO); Pence, Laura (HHS/IOS); Kemper, Laura (HHS/ASL)

Subject: ASPR Briefing for Policy Team - [MATERIALS ATTACHED]

Attachments: Agenda_ASPR Brief to OS Policy Team 8_16.docx, ASPR Week Ahead

Report 08.02.17.docx, OEM Policy Brief on exercises and real world events.pptx, PBS

Investmenst Final Draft.pptx, Update Operation DOWNPOUR v3.pptx



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ASFR: Jen Moughalian, Norris Cochran

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<u>Location</u>: Exec Sec Conf Rm 614H; (b)(6) Passcode (b)(6) Leader Code (b)(6)

Contact: Dr. Ekaterini (Kat) Malliou at Ekaterini.Malliou@hhs.gov; 202-690-6875

Page 122
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(b)(5)
of the Freedom of Information Act

Page 123
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Withheld pursuant to exemption

(b)(5)

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(b)(5)

Sent: 28 Jun 2018 10:51:00 +0000

To: Policy Briefings Scheduler (OS/IOS);Stannard, Paula (HHS/IOS);Lapinski, Mary-Sumpter (HHS/IOS);Wynne, Maggie (HHS/IOS);Brooks, John (HHS/IOS);Bell, Kathryn (HHS/IOS);Caliguiri, Laura (HHS/IOS);Agnew, Ann (HHS/IOS);Gabriel, Edward (OS/ASPR/IO);Meekins, Chris (OS/ASPR/IO);Flick, Heather (OS/OGC);Moughalian, Jen (HHS/ASFR);Cochran, Norris (HHS/ASFR);Ford-Barnes, Arwenthia (HHS/ASPR/IO);Malliou, Ekaterini (OS/IOS);Abram, Anna (FDA/OC);Kalavritinos, Jack (FDA/OC);Kadlec, Robert (OS/ASPR/IO)

Cc: Moss, Marcille (OS/ASPR);Robinson, Wilma (HHS/IOS);Hawkins, Jamar (HHS/OS);Bowles, Jamil (HHS/IOS);Stimson, Brian (HHS/OGC);Bowman, Matthew (HHS/OGC);Stephan, Briana (OS/ASPR/IO);Pence, Laura (HHS/IOS);Kemper, Laura (HHS/ASL);Horska, Katerina (HHS/IOS)

Subject: ASPR Briefing for Policy Team - [MATERIALS ATTACHED]

Attachments: Agenda_ASPR Brief to OS Policy Team 8_23.docx, Concept Paper ASPR-

CDC Emerging Infectious Disease v2.docx



<u>Purpose</u>: Continuation meeting with Counselors. Please contact Dr. Ekaterini Malliou should you have any questions.

Meeting Participants:

Counselors: Paula Stannard, Mary-Sumpter Lapinski, Maggie Wynne, John Brooks, Kathryn Bell

Deputy Secretary's Office: Laura Caliguiri Exec Sec: Ann Agnew, Ekaterini (Kat) Malliou ASPR: Edward Gabriel, Chris Meekins, Robert Kadlec

OGC: Heather Flick

ASFR: Jen Moughalian, Norris Cochran

FDA: Anna Abram - via phone; Jack Kalavritinos - via phone

Location: Exec Sec Conf Rm 614H; (b)(6) Passcode (b)(6) Leader Code (b)(6)

Contact: Dr. Ekaterini (Kat) Malliou at Ekaterini.Malliou@hhs.gov; 202-690-6875

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(b)(5)

Withheld pursuant to exemption

(b)(5)

Withheld pursuant to exemption

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Page 146
Withheld pursuant to exemption

Withheld pursuant to exemption

(b)(5)

Withheld pursuant to exemption

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Withheld pursuant to exemption

(b)(5)

Page 150
Withheld pursuant to exemption

From: Policy Briefings Scheduler (OS/IOS)
Sent: 11 Aug 2017 20:01:38 +0000

To: Policy Briefings Scheduler (OS/IOS);Stannard, Paula (HHS/IOS);Lapinski, Mary-Sumpter (HHS/IOS);Wynne, Maggie (HHS/IOS);Brooks, John (HHS/IOS);Bell, Kathryn (HHS/IOS);Caliguiri, Laura (HHS/IOS);Agnew, Ann (HHS/IOS);Malliou, Ekaterini (OS/IOS);Gabriel, Edward (OS/ASPR/IO);Meekins, Chris (OS/ASPR/IO);Flick, Heather (OS/OGC);Moughalian, Jen (HHS/ASFR);Cochran, Norris (HHS/ASFR);Abram, Anna (FDA/OC);Kalavritinos, Jack (FDA/OC);Ford-Barnes, Arwenthia (HHS/ASPR/IO);Kadlec, Robert (OS/ASPR/IO)

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Subject: ASPR Briefing for Policy Team

Attachments: Untitled, Untitled

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OGC: Heather Flick

ASFR: Jen Moughalian, Norris Cochran

FDA: Anna Abram – via phone; Jack Kalavritinos – via phone

Location: Exec Sec Conf Rm 614H; (b)(6), Passcode (b)(6) Leader Code (b)(6)

Sent: 28 Jun 2018 10:51:19 +0000

To: Policy Briefings Scheduler (OS/IOS);Stannard, Paula (HHS/IOS);Lapinski, Mary-Sumpter (HHS/IOS);Wynne, Maggie (HHS/IOS);Brooks, John (HHS/IOS);Bell, Kathryn (HHS/IOS);Caliguiri, Laura (HHS/IOS);Agnew, Ann (HHS/IOS);Malliou, Ekaterini (OS/IOS);Korch, George (OS/ASPR/IO);Gabriel, Edward (OS/ASPR/IO);Meekins, Chris (OS/ASPR/IO);Flick, Heather (OS/OGC);Moughalian, Jen (HHS/ASFR);Cochran, Norris (HHS/ASFR);Abram, Anna (FDA/OC);Kalavritinos, Jack (FDA/OC);Ford-Barnes, Arwenthia (HHS/ASPR/IO)

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Subject: ASPR Briefing for Policy Team - [MATERIALS ATTACHED]

Attachments: Agenda_ASPR Brief to OS Policy Team 8_16.docx, ASPR Week Ahead

Report 08.02.17.docx, OEM Policy Brief on exercises and real world events.pptx, PBS

Investmenst Final Draft.pptx, Update Operation DOWNPOUR v3.pptx



<u>Purpose</u>: Continuation meeting with Counselors. Please contact Dr. Ekaterini Malliou should you have any questions.

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OGC: Heather Flick

ASFR: Jen Moughalian, Norris Cochran

FDA: Anna Abram - via phone; Jack Kalavritinos - via phone

Location: Exec Sec Conf Rm 614H; (b)(6), Passcode (b)(6) Leader Code (b)(6)

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Page 154
Withheld pursuant to exemption
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of the Freedom of Information Act

Withheld pursuant to exemption

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Sent: 28 Jun 2018 10:51:20 +0000

To: Policy Briefings Scheduler (OS/IOS);Stannard, Paula (HHS/IOS);Lapinski, Mary-Sumpter (HHS/IOS);Wynne, Maggie (HHS/IOS);Brooks, John (HHS/IOS);Bell, Kathryn (HHS/IOS);Caliguiri, Laura (HHS/IOS);Agnew, Ann (HHS/IOS);Gabriel, Edward (OS/ASPR/IO);Meekins, Chris (OS/ASPR/IO);Flick, Heather (OS/OGC);Moughalian, Jen (HHS/ASFR);Cochran, Norris (HHS/ASFR);Ford-Barnes, Arwenthia (HHS/ASPR/IO);Malliou, Ekaterini (OS/IOS);Korch, George (OS/ASPR/IO);Abram, Anna (FDA/OC);Kalavritinos, Jack (FDA/OC);Kadlec, Robert (OS/ASPR/IO)

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<u>Location</u>: Exec Sec Conf Rm 614H; (b)(6) Passcode (b)(6) Leader Code (b)(6)

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Location: Exec Sec Conf Rm 614H; (b)(6) , Passcode (b)(6) Leader Code (b)(6)

Sent: 28 Jun 2018 10:51:35 +0000

To: Policy Briefings Scheduler (OS/IOS);Stannard, Paula (HHS/IOS);Lapinski, Mary-Sumpter (HHS/IOS);Wynne, Maggie (HHS/IOS);Brooks, John (HHS/IOS);Bell, Kathryn (HHS/IOS);Caliguiri, Laura (HHS/IOS);Agnew, Ann (HHS/IOS);Malliou, Ekaterini (OS/IOS);Korch, George (OS/ASPR/IO);Gabriel, Edward (OS/ASPR/IO);Meekins, Chris (OS/ASPR/IO);Flick, Heather (OS/OGC);Moughalian, Jen (HHS/ASFR);Cochran, Norris (HHS/ASFR);Abram, Anna (FDA/OC);Kalavritinos, Jack (FDA/OC);Ford-Barnes, Arwenthia (HHS/ASPR/IO)

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FDA: Anna Abram - via phone; Jack Kalavritinos - via phone

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Subject: ASPR Briefing for Policy Team
Attachments: Untitled, Untitled, Untitled

<u>Purpose</u>: Continuation meeting with Counselors. Please contact Dr. Ekaterini Malliou should you have any questions.

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Deputy Secretary's Office: Laura Caliguiri Exec Sec: Ann Agnew, Ekaterini (Kat) Malliou

ASPR: Edward Gabriel, Chris Meekins, Robert Kadlec

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Location: Exec Sec Conf Rm 614H; (b)(6) Passcode (b)(6) Leader Code (b)(6)

Contact: Dr. Ekaterini (Kat) Malliou at Ekaterini.Malliou@hhs.gov; 202-690-6875

Non Responsive Record		

From: Boyce, Lucas [mailto:Lucas.Boyce@heritage.org]

Sent: Tuesday, November 14, 2017 9:06 AM

To: Clark, Timothy (HHS/IOS) <Timothy.Clark1@hhs.gov>; Stirrup, Heidi (HHS/IOS)

<Heidi.Stirrup@hhs.gov>

Subject: RE: Meetings With The Department of Health & Human Services RE: Heritage Foundation

Mandate For Leadership

yes sir. Thank you.

Lucas Boyce

Senior Advisor for Executive Branch Relations The Heritage Foundation 214 Massachusetts Avenue, NE Washington, DC 20002 202-546-4400 heritage.org

From: Clark, Timothy (HHS/IOS) [Timothy.Clark1@hhs.gov]

Sent: Monday, November 13, 2017 1:32 PM **To:** Boyce, Lucas; Stirrup, Heidi (HHS/IOS)

Subject: RE: Meetings With The Department of Health & Human Services RE: Heritage Foundation

Mandate For Leadership

Thanks for the note. We'll get back to you shortly.

From: Boyce, Lucas [mailto:Lucas.Boyce@heritage.org]

Sent: Monday, November 13, 2017 8:49 AM

To: Clark, Timothy (HHS/IOS) < Timothy.Clark1@hhs.gov >; Stirrup, Heidi (HHS/IOS)

<Heidi.Stirrup@hhs.gov>

Subject: RE: Meetings With The Department of Health & Human Services RE: Heritage Foundation

Mandate For Leadership

Hi Timothy and Heidi.

I hope all is well. Would you be able to help with the below query? I'm happy to hop on a quick phone call to provide additional information for consideration.

We are grateful for anything you might be able to do.

Lucas Boyce

Senior Advisor for Executive Branch Relations The Heritage Foundation 214 Massachusetts Avenue, NE Washington, DC 20002 202-546-4400

heritage.org

From: Boyce, Lucas

Sent: Thursday, November 2, 2017 11:14 AM

To: Timothy.Clark1@hhs.gov; Heidi.Stirrup@hhs.gov

Cc: Fishpaw, Marie < Marie. Fishpaw@heritage.org >; Kao, Emilie < Emilie. Kao@heritage.org >; Binion,

Thomas <Thomas.Binion@heritage.org>

Subject: Meetings With The Department of Health & Human Services RE: Heritage Foundation

Mandate For Leadership

Good morning Timothy and Heidi,

I serve as a Senior Advisor for Executive Branch Relations at the Heritage Foundation.

I'm reaching out on behalf of the Heritage Foundation to ask your help in setting up appointments to meet with key personnel at the department.

Heritage Foundation's research analysts and thought leaders have crafted a series of policy recommendations compiled into five bodies of work entitled: **The Mandate For Leadership.** Some more information about the Mandate is below for your review.

With this in mind we are asking for your help in connecting us with the a appropriate agency staff/ political appointees that could benefit from our policy experts' research.

With your assistance we'd like to set up meetings with appointees or policy staff that have jurisdiction over the following issue areas.

Issue Areas/Recommendations

- Welfare Reform Across Means Tested Programs
- Implementation of ACA
- Preventative Services Requirements
- ACA Risk Corridor Program Funding

Would you be able to assist us with the contact information including email and phone number for decision makers that have jurisdiction over the above issues areas/offices?

The Heritage Foundation is grateful for any help and guidance you are able to provide.

Sincerely,

Lucas

P.S....

Mandate for Leadership: A Comprehensive Policy Agenda for a New Administration

Heritage Releases Final Volume in 2016 "Mandate for Leadership" Series

The Mandate For Leadership series are individually entitled as follows:

- 1. Blueprint for Reform: A Comprehensive Policy Agenda for a New Administration in 2017
- 2. Blueprint for a New Administration: Priorities for the President
- 3. Blueprint for Reorganization: An Analysis of Federal Departments and Agencies
- 4. Blueprint for Reorganization: Pathways to Reform and Cross-Cutting Issues
- 5. Blueprint for Balance: A Federal Budget for Fiscal Year 2018

The policy prescriptions and detailed research proposed in the the **Mandate for Leadership Series** align with President Trump's philosophical approach on the proper role of the federal government.

The policy reforms are based entirely on the principles of:

- Free Enterprise
- · Limited Government
- · Individual Freedom
- Traditional American values
- Strong National Defense

Given President Trump's *Make America Great Again* agenda and leadership priorities, the over 500,000 members and senior leadership of the Heritage Foundation believe these detailed reforms are of incredible value to your department's efforts to enacting the President's agenda.

Heritage believes the personnel serving in the Trump Administration would benefit from the compiled research and recommendations.

Senior Advisor for Executive Branch Relations 202-546-4400

From:	Stirrup, Heidi (HHS/IOS)
Sent:	16 Jan 2018 18:16:51 +0000
To:	nina.schaefer@heritage.org
Subject:	FW: Resume and Follow-Up
Attachments:	Resume (January 2018).docx
Dear Nina:	
with Heritage Foun William and Mary i he a <u>friend</u> of our fi	a friend of our dear friends – who is interested in an internship or possible position dation – in national security or foreign policy. (b)(6) s on track to graduate from n May 2018 and while I only just met him, and cannot speak to his abilities directly, riends (b)(6) since the third grade $-\frac{(b)}{(c)}$ knows (b)(6) attended school together since third grade. (b)(6) dad and (b)(6) dad (our friend) a
	ir Force. Any consideration is greatly appreciated. Thank you.
Heidi Stirrup	
Office of White Ho	use Liaison
	Health and Human Services
202-868-9828	
Responsive Record	

 From:
 Stirrup, Heidi (HHS/IOS)

 Sent:
 4 May 2017 17:39:54 +0000

To: Autumn Christensen (AChristensen@sba-list.org)

Subject: FW: Secretary Price Welcomes Opportunity to Reexamine Contraception

Mandate

From: HHS Office of Public Affairs [mailto:hhsopa@hhs.gov]

Sent: Thursday, May 04, 2017 12:23 PM

To: Stirrup, Heidi (HHS/IOS)

Subject: Secretary Price Welcomes Opportunity to Reexamine Contraception Mandate



Press Statement

202-690-6343 media@hhs.gov www.hhs.gov/news Twitter @HHSMedia

FOR IMMEDIATE RELEASE

Thursday, May 4, 2017

Secretary Price Welcomes Opportunity to Reexamine Contraception Mandate

Today, Health and Human Services Secretary Tom Price, M.D., issued the following statement regarding President Trump's executive order on religious freedom:

"Religious liberty is our country's first freedom. Americans of faith play a vital role in caring for our most vulnerable citizens, including the elderly and the poor.

"We welcome today's executive order directing the Department of Health and Human Services to reexamine the previous administration's interpretation of the Affordable Care Act's preventive services mandate, and commend President Trump for taking a strong stand for religious liberty.

"We will be taking action in short order to follow the President's instruction to safeguard the deeply held religious beliefs of Americans who provide health insurance to their employees."

Connect with HHS and sign up for HHS email updates. Like HHS Secretary Tom Price, M.D. on Facebook and follow HHS Secretary Price on Twitter @SecPriceMD.









If you would rather not receive future communications from U.S. Department of Health and Human Services (HHS), let us know by

U.S. Department of Health and Human Services (HHS), 200 Independence Avenue, SW 6th Floor Room 647-D, Washington, DC 20201 United States

 From:
 Stirrup, Heidi (HHS/IOS)

 Sent:
 6 Oct 2017 16:01:56 +0000

To: Autumn Christensen (AChristensen@sba-list.org)

Subject: FW: Trump Administration Issues Rules Protecting the Conscience Rights of All

Americans

From: HHS Office Of Public Affairs [mailto:hhsopa@hhs.gov]

Sent: Friday, October 06, 2017 11:17 AM

To: Stirrup, Heidi (HHS/IOS)

Subject: Trump Administration Issues Rules Protecting the Conscience Rights of All Americans



News Release

U.S. Department of Health and Human Services

202-690-6343 media@hhs.gov www.hhs.gov/news Twitter @HHSMedia

FOR IMMEDIATE RELEASE

Friday, October 6, 2017

Trump Administration Issues Rules Protecting the Conscience Rights of All Americans

The Departments of Health and Human Services, Treasury, and Labor are announcing two companion interim final rules that provide conscience protections to Americans who have a religious or moral objection to paying for health insurance that covers contraceptive/abortifacient services. Obamacare-compliant health insurance plans are required to cover "preventive services," a term defined through regulation. Under the existing regulatory requirements created by the previous administration, employers, unless they qualify for an exemption, must offer health insurance that covers all FDA-approved contraception, which includes medications and devices that may act as abortifacients as well as sterilization procedures.

Under the first of two companion rules released today, entities that have sincerely held religious beliefs against providing such services would no longer be required to do so. The second rule applies the same protections to organizations and small businesses that have objections on the basis of moral conviction which is not based in any particular religious belief.

In May, President Trump issued an "Executive Order Promoting Free Speech and Religious Liberty" in which the President directed the Secretaries of Health and Human

Services, Labor and the Treasury to consider amending existing regulations relative to Obamacare's preventive-care mandate in order to address conscience-based objections.

Key facts about today's interim final rules:

- The regulations exempt entities only from providing an otherwise mandated item to which they object on the basis of their religious beliefs or moral conviction.
- The regulation leaves in place preventive services coverage guidelines where no religious or moral objection exists meaning that out of millions of employers in the U.S., these exemptions may impact only about 200 entities, the number that that filed lawsuits based on religious or moral objections.
 - These rules will not affect over 99.9% of the 165 million women in the United States.
- Current law itself already exempts over 25 million people from the preventive-care
 mandate because they are insured through an entity that has a health insurance plan
 that existed prior to the Obamacare statute.
- The regulations leave in place government programs that provide free or subsidized contraceptive coverage to low income women, such as through community health centers.
- These regulations do not ban any drugs or devices.

The mandate as defined by the previous administration suffered defeats in court after court, including the Supreme Court, which ruled that the government cannot punish business owners for their faith.

###

Connect with HHS and sign up for HHS email updates



If you would rather not receive future communications from U.S. Department of Health and Human Services (HHS), let us know by clicking <u>here.</u>

U.S. Department of Health and Human Services (HHS), 200 Independence Avenue, SW 6th Floor Room 647-D, Washington, DC 20201 United States

Non Responsive Record			

From: "Richardson, Helena" < Helena. Richardson@heritage.org >

Subject: Re: Intern candidate resume and Follow-Up

Date: 16 January 2018 17:46

To: "Wagner, Bridgett" < bridgett.wagner@heritage.org **Cc:** "Stirrup, Heidi (HHS/IOS)" < Heidi.Stirrup@hhs.gov

Hello Heidi,

I will follow up with (b)(6) and add a note in his file.

Thank you so much.

Helena

Helena Ramirez Richardson

Director, Young Leaders Program
The Heritage Foundation
214 Massachusetts Avenue, NE
Washington, DC 20002
202-608-6032
heritage.org

On Jan 16, 2018, at 5:39 PM, Wagner, Bridgett < bridgett.wagner@heritage.org > wrote:

Heidi-

I've copied Helena Richardson into this email. Helena heads up our Young Leaders Program which includes our intern program. I know she will be pleased to learn of your knowledge of this candidate.

Best, Bridgett

Begin forwarded message:

Greetings, Bridget:
Hope this message finds you well.
I attached the resume for (b)(6) who I only met this past weekend, but he has been a friend of the family of dear friends of (b)(6) and mine – (b)(6) — as their sons attended third grad together and have been friends ever since. He is expecting to graduate from William & Mary University in VA in May, 2018 and is very interested in a possible internship or position with Heritage. I would be extremely grateful if someone would follow-up with (b)(6)
and discuss any possibilities. Thank you for your consideration.
With kind regards,
Heidi Stirrup Office of White House Liaison U.S. Department of Health and Human Services 202-868-9828

Non Responsive Record			

From: "Wagner, Bridgett" < bridgett.wagner@heritage.org>

Subject: Intern candidate resume and Follow-Up

Date: 16 January 2018 17:39

To: "Stirrup, Heidi (HHS/IOS)" < <u>Heidi.Stirrup@hhs.gov</u>> **Cc:** "Richardson, Helena" < <u>Helena.Richardson@heritage.org</u>>

Heidi-

I've copied Helena Richardson into this email. Helena heads up our Young Leaders Program which includes our intern program. I know she will be pleased to learn of your knowledge of this candidate.

Best, Bridgett

Bridgett Wagner

Vice President, Policy Promotion
The Heritage Foundation
214 Massachusetts Avenue, NE
Washington, DC 20002
202-608-6050
heritage.org

Begin forwarded message:

From: "Stirrup, Heidi (HHS/IOS)" < Heidi.Stirrup@hhs.gov >

Date: January 16, 2018 at 4:38:12 PM EST

To: "bridgett.wagner@heritage.org" <bri>bridgett.wagner@heritage.org>

Subject: Resume and Follow-Up

Greetings, Bridget:

Hope this message finds you well.

I attached the resume for (b)(6) who I only met this past weekend, but he has been a friend of the family of dear friends of (b)(6) and mine — (b)(6) — as their sons attended third grade together and have been friends ever since. He is expecting to graduate from William & Mary University in VA in May, 2018 and is very interested in a possible internship or position with Heritage. I would be extremely grateful if someone would follow-up with (b) and discuss any possibilities.

Thank you for your consideration.

With kind regards,

Heidi Stirrup Office of White House Liaison
U.S. Department of Health and Human Services 202-868-9828

Non Responsive Record	
Inon responsive record	

on Responsive Record	

From: "Richardson, Helena" < Helena. Richardson@heritage.org >

Subject: Re: Intern candidate resume and Follow-Up

Date: 16 January 2018 17:46

To: "Wagner, Bridgett" < bridgett.wagner@heritage.org>
Ce: "Stirrup, Heidi (HHS/IOS)" < Heidi.Stirrup@hhs.gov>

Hello Heidi,

I will follow up with (b) and add a note in his file.

Thank you so much.

Helena

Helena Ramirez Richardson
Director, Young Leaders Program
The Heritage Foundation
214 Massachusetts Avenue, NE
Washington, DC 20002
202-608-6032
heritage.org

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Best, Bridgett

Bridgett Wagner Vice President, Policy Promotion x6050

Begin forwarded message:

From: "Stirrup, Heidi (HHS/IOS)" < Heidi.Stirrup@hhs.gov>

Date: January 16, 2018 at 4:38:12 PM EST

To: "bridgett.wagner@heritage.org" <bri>dgett.wagner@heritage.org> Subject: Resume and Follow-Up

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weekend, but he has been a friend of the family of dear friends of
(b)(6) and mine $-$ (b)(6) and mine $-$ as their sons attended third
grade together and have been friends ever since. He is expecting
to graduate from William & Mary University in VA in May, 2018
and is very interested in a possible internship or position with
Heritage. I would be extremely grateful if someone would follow-
up with (b) and discuss any possibilities.
Thank you for your consideration.
With kind regards,
Heidi Stirrup
Office of White House Liaison
U.S. Department of Health and Human Services
<u>202-868-9828</u>

Non Responsive Record	

From: Billy Valentine

Sent:12 Apr 2017 21:02:16 +0000To:Stirrup, Heidi (HHS/IOS)Cc:Marjorie Dannenfelser

Subject: Jane Norton

Hi Heidi,

I hope all is well on your end!

Marjorie asked that I shoot you an email to put in a good word for Jane Norton. It is our understanding that she has been interviewed for HHS Director of Intergovernmental and External Affairs. While not knowing who else may be up for the position, Marjorie wanted to express that she thinks Jane would be an excellent fit and that we are a big fan of hers. We endorsed her when she ran for Senate in Colorado back in 2010.

I do not know Jane personally, but I worked extensively with her husband Mike when he was with ADF.

Marjorie may have more to add here as she knows Jane personally.

If you have any questions, please do not hesitate to ask!

Billy

Billy Valentine
Vice President of Public Policy
Susan B. Anthony List
202-223-8073 (office)

(b)(6) (mobile)

www.sba-list.org

From: Boyce, Lucas

Sent: 2 Nov 2017 15:13:58 +0000

To: Clark, Timothy (HHS/IOS);Stirrup, Heidi (HHS/IOS)
Cc: Fishpaw, Marie;Kao, Emilie;Binion, Thomas

Subject: Meetings With The Department of Health & Human Services RE: Heritage

Foundation Mandate For Leadership

Good morning Timothy and Heidi,

I serve as a Senior Advisor for Executive Branch Relations at the Heritage Foundation.

I'm reaching out on behalf of the Heritage Foundation to ask your help in setting up appointments to meet with key personnel at the department.

Heritage Foundation's research analysts and thought leaders have crafted a series of policy recommendations compiled into five bodies of work entitled: **The Mandate For Leadership.** Some more information about the Mandate is below for your review.

With this in mind we are asking for your help in connecting us with the a appropriate agency staff/ political appointees that could benefit from our policy experts' research.

With your assistance we'd like to set up meetings with appointees or policy staff that have jurisdiction over the following issue areas.

Issue Areas/Recommendations

- Welfare Reform Across Means Tested Programs
- Implementation of ACA
- Preventative Services Requirements
- ACA Risk Corridor Program Funding

Would you be able to assist us with the contact information including email and phone number for decision makers that have jurisdiction over the above issues areas/offices?

The Heritage Foundation is grateful for any help and guidance you are able to provide.

Sincerely,

Lucas

P.S....

Mandate for Leadership: A Comprehensive Policy Agenda for a New Administration

Heritage Releases Final Volume in 2016 "Mandate for Leadership" Series

The **Mandate For Leadership** series are individually entitled as follows:

- 1. Blueprint for Reform: A Comprehensive Policy Agenda for a New Administration in 2017
- 2. Blueprint for a New Administration: Priorities for the President
- 3. Blueprint for Reorganization: An Analysis of Federal Departments and Agencies
- 4. Blueprint for Reorganization: Pathways to Reform and Cross-Cutting Issues
- 5. Blueprint for Balance: A Federal Budget for Fiscal Year 2018

The policy prescriptions and detailed research proposed in the the **Mandate for Leadership Series** align with President Trump's philosophical approach on the proper role of the federal government.

The policy reforms are based entirely on the principles of:

- Free Enterprise
- Limited Government
- · Individual Freedom
- · Traditional American values
- Strong National Defense

Given President Trump's *Make America Great Again* agenda and leadership priorities, the over 500,000 members and senior leadership of the Heritage Foundation believe these detailed reforms are of incredible value to your department's efforts to enacting the President's agenda.

Heritage believes the personnel serving in the Trump Administration would benefit from the compiled research and recommendations.

Lucas Boyce

Senior Advisor for Executive Branch Relations
The Heritage Foundation
214 Massachusetts Avenue, NE
Washington, DC 20002
202-546-4400
heritage.org

From: Jeanne Mancini

Sent: 17 Oct 2017 19:17:58 +0000 **To:** Stirrup, Heidi (HHS/IOS)

Subject: Please Join Us!

Attachments: March for Life Invitation.jpg



Dear Mr. and Mrs. Stirrup,

We would be delighted to have you join us on the evening of November 9th for a reception in support and celebration of the March for Life.

Please see the attached invitation with more details.

Looking forward to seeing you,

Jeanne F. Marcini

Jeanne Mancini

President, March for Life Education and Defense Fund

Please join the Board of Directors in celebration and support of the upcoming ${\bf 45}^{th} \; {\bf Annual}$



Thursday, November 9, 2017 | 7:00 - 8:30 p.m.

The Home of Mark and Ann Goedde 234 Moore Avenue SE Vienna, VA 22180

Special presentation at 7:30

Please RSVP to AnneMarieWarner@marchforlife.org

Please join the Board of Directors in celebration and support of the upcoming 45th Annual



Thursday, November 9, 2017 | 7:00 - 8:30 p.m.

The Home of Mark and Ann Goedde 234 Moore Avenue SE

Vienna, VA 22180

Special presentation at 7:30

Please RSVP to AnneMarieWarneremarchforlife.org

 From:
 Stirrup, Heidi (HHS/IOS)

 Sent:
 22 Feb 2018 19:45:19 +0000

To: Wagner, Bridgett
Subject: RE: Executive Scheduler

That's perfect, Bridgett. Just what I needed. Thank you.

From: Wagner, Bridgett [mailto:bridgett.wagner@heritage.org]

Sent: Thursday, February 22, 2018 1:45 PM

To: Stirrup, Heidi (HHS/IOS) **Subject:** Re: Executive Scheduler

Happy to help on this. I just forwarded to a friend who is an executive asst at a law firm and was looking to move into the Administration. Will let you know what she says. Also will share with our Job Bank folks to ask if they have any appropriate candidates in their system.

BGW

On Feb 22, 2018, at 1:30 PM, Stirrup, Heidi (HHS/IOS) <Heidi.Stirrup@hhs.gov> wrote:

Dear Bridgett:

You may be at CPAC – hoping you can help me with my search for an Executive Scheduler for the Secretary, Alex M. Azar II.

We are looking for an executive scheduler for HHS Secretary Azar who is not only experienced at scheduling, but also has the added experience of strategically understanding how best to allocate the Secretary's limited time.

Qualities such as discernment, judgment, organization, multi-tasking, attention to details and an ability to manage with a personable demeanor are all key. If you know of suitable candidates, please send them my way. Thank you!

Sincerely

Heidi Stirrup Office of White House Liaison U.S. Department of Health and Human Services 202-868-9828

Bridgett Wagner

Vice President, Policy Promotion The Heritage Foundation 214 Massachusetts Avenue, NE Washington, DC 20002 202-608-6050 heritage.org
 From:
 Stirrup, Heidi (HHS/IOS)

 Sent:
 17 Jan 2018 01:26:34 +0000

To: Richardson, Helena; Wagner, Bridgett

Subject: Re: Intern candidate resume and Follow-Up

Thank you both very much for your kind consideration.

Heidi Stirrup Office of White House Liaison U.S. Department of Health and Human Services 202-868-9828

On: 16 January 2018 17:46, "Richardson, Helena" < Helena.Richardson@heritage.org wrote: Hello Heidi,

I will follow up with (b)(6) and add a note in his file.

Thank you so much.

Helena

Helena Ramirez Richardson

Director, Young Leaders Program
The Heritage Foundation
214 Massachusetts Avenue, NE
Washington, DC 20002
202-608-6032
heritage.org

On Jan 16, 2018, at 5:39 PM, Wagner, Bridgett bridgett.wagner@heritage.org wrote:

Heidi-

I've copied Helena Richardson into this email. Helena heads up our Young Leaders Program which includes our intern program. I know she will be pleased to learn of your knowledge of this candidate.

Best, Bridgett

Bridgett Wagner Vice President, Policy Promotion x6050

Begin forwarded message:

F	rom: "Stirrup, Heidi (HHS/IOS)" < Heidi.Stirrup@hhs.gov>
D	Pate: January 16, 2018 at 4:38:12 PM EST
Т	o: "bridgett.wagner@heritage.org"
<	bridgett.wagner@heritage.org>
	ubject: Resume and Follow-Up
G	reetings, Bridget:
Н	ope this message finds you well.
La	attached the resume for (b)(6) who I only met this past
w	eekend, but he has been a friend of the family of dear friends of
(b)(6	and mine – the (b)(6) as their sons attended third grade
to	ogether and have been friends ever since. He is expecting to
gr	raduate from William & Mary University in VA in May, 2018 and is
Ve	ery interested in a possible internship or position with Heritage. I
W	ould be extremely grateful if someone would follow-up with (b)(6)
ar	nd discuss any possibilities.
Th	nank you for your consideration.
W	/ith kind regards,
Н	eidi Stirrup
	ffice of White House Liaison
	.S. Department of Health and Human Services
	02-868-9828
Non Responsive	e Record

From: Marjorie Dannenfelser

Sent: 12 Apr 2017 21:51:22 +0000

To: Stirrup, Heidi (HHS/IOS)

Cc: Billy Valentine
Subject: Re: Jane Norton

Thank you!!

Marjorie Dannenfelser President Susan B. Anthony List

On Apr 12, 2017, at 5:39 PM, Stirrup, Heidi (HHS/IOS) < Heidi.Stirrup@hhs.gov > wrote:

Thank you very much for this, Marjorie. Your endorsement and that of SBA List means a great deal to this Administration and most especially this Department. Thank you.

With warm regards,

Heidi Stirrup Office of White House Liaison U.S. Department of Health and Human Services 202-868-9828

From: Marjorie Dannenfelser [mailto:mdannenfelser@SBA-LIST.ORG]

Sent: Wednesday, April 12, 2017 5:10 PM

To: Stirrup, Heidi (HHS/IOS)

Cc: Billy Valentine

Subject: Re: Jane Norton

Heidi,

I'm sure you know Jane. I have known her and our team has known her for quite some time because of our endorsement of her and partnership beyond. She is completely trustworthy and talented, a warrior like you.

Marjorie Dannenfelser President Susan B. Anthony List

On Apr 12, 2017, at 5:03 PM, Stirrup, Heidi (HHS/IOS) < Heidi.Stirrup@hhs.gov > wrote:

Thank you very much.

Heidi Stirrup Office of White House Liaison

U.S. Department of Health and Human Services 202-868-9828

From: Billy Valentine [mailto:bvalentine@SBA-LIST.ORG]

Sent: Wednesday, April 12, 2017 5:02 PM

To: Stirrup, Heidi (HHS/IOS)
Cc: Marjorie Dannenfelser
Subject: Jane Norton

Hi Heidi,

I hope all is well on your end!

Marjorie asked that I shoot you an email to put in a good word for Jane Norton. It is our understanding that she has been interviewed for HHS Director of Intergovernmental and External Affairs. While not knowing who else may be up for the position, Marjorie wanted to express that she thinks Jane would be an excellent fit and that we are a big fan of hers. We endorsed her when she ran for Senate in Colorado back in 2010.

I do not know Jane personally, but I worked extensively with her husband Mike when he was with ADF.

Marjorie may have more to add here as she knows Jane personally.

If you have any questions, please do not hesitate to ask!

Billy

Billy Valentine
Vice President of Public Policy
Susan B. Anthony List
202-223-8073 (office)
(b)(6) (mobile)

www.sba-list.org

 From:
 Stirrup, Heidi (HHS/IOS)

 Sent:
 10 Aug 2017 14:39:38 +0000

To: McMahon, Sean

Subject: RE: Luncheon Invitation with former Reagan Attorney General Edwin Meese

I'd love to be there – I actually worked in the West Wing when Ed Meese was Counselor to President Reagan. I'd love to see him again. Thank you for thinking of me.

Best wishes,

Heidi Stirrup Office of White House Liaison U.S. Department of Health and Human Services 202-868-9828

From: McMahon, Sean [mailto:Sean.McMahon@heritage.org]

Sent: Thursday, August 10, 2017 9:57 AM

To: Stirrup, Heidi (HHS/IOS)

Subject: Luncheon Invitation with former Reagan Attorney General Edwin Meese

Dear Heidi,

I wanted to personally reach out and invite you to a luncheon with your fellow White House Liaisons featuring former Reagan Attorney General Edwin Meese.

The lunch will provide an off-the-record opportunity to hear General Meese share his experience working to staff the Reagan Administration.

This private lunch is being held at The Heritage Foundation on Friday August 18th at 12:30 pm.

If you are able to join us, please RSVP to me at sean.mcmahon@heritage.org or (202) 608-6205.

Sean McMahon

Sean McMahon

Manager, Executive Branch Outreach and Candidate Briefing Program
The Heritage Foundation
214 Massachusetts Avenue, NE
Washington, DC 20002
202-608-6205
heritage.org

 From:
 Stirrup, Heidi (HHS/IOS)

 Sent:
 10 Aug 2017 19:20:00 +0000

To: McMahon, Sean

Subject: RE: Luncheon Invitation with former Reagan Attorney General Edwin Meese

Indeed. Thank you. See you then.

From: McMahon, Sean [mailto:Sean.McMahon@heritage.org]

Sent: Thursday, August 10, 2017 3:17 PM

To: Stirrup, Heidi (HHS/IOS)

Subject: Re: Luncheon Invitation with former Reagan Attorney General Edwin Meese

Heidi,

That's great to hear! And how amazing to have worked with Mr. Meese during the Reagan Administration – you must have some incredible stories from that time!

Looking forward to seeing you next Friday at Heritage.

Sean McMahon

Sean McMahon

Manager, Executive Branch Outreach and Candidate Briefing Program
The Heritage Foundation
214 Massachusetts Avenue, NE
Washington, DC 20002
202-608-6205
heritage.org

From: "Stirrup, Heidi (HHS/IOS)" < Heidi.Stirrup@hhs.gov>

Date: Thursday, August 10, 2017 at 10:39 AM

To: Sean McMahon < Sean. McMahon@heritage.org>

Subject: RE: Luncheon Invitation with former Reagan Attorney General Edwin Meese

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Sean McMahon

Sean McMahon

Manager, Executive Branch Outreach and Candidate Briefing Program
The Heritage Foundation
214 Massachusetts Avenue, NE
Washington, DC 20002
202-608-6205
heritage.org

 From:
 Stirrup, Heidi (HHS/IOS)

 Sent:
 3 May 2017 13:57:50 +0000

To: Autumn Christensen

Subject: RE: Media

That is really great. Thank you.

From: Autumn Christensen [mailto:achristensen@sba-list.org]

Sent: Wednesday, May 03, 2017 8:53 AM

To: Stirrup, Heidi (HHS/IOS)

Subject: Re: Media

I think we have generated about 300 tweets and 3000 emails so far.

Sent from my iPhone

On May 3, 2017, at 5:32 AM, Stirrup, Heidi (HHS/IOS) < Heidi.Stirrup@hhs.gov > wrote:

You are the best! Thank you so much.

Heidi Stirrup Office of White House Liaison U.S. Department of Health and Human Services 202-868-9828

On: 02 May 2017 20:57, "Autumn Christensen" achristensen@sba-list.org wrote:

Here is a compilation of media reports quoting us on Yoest and Manning. I am going to share it with Paul Teller and Laura Truman too.

Media: SBA List on Appointment of Charmaine Yoest & Teresa Manning

Charmaine Yoest

- AP 4/28 TRUMP NAMES ANTI-ABORTION LEADER TO HIGH POST AT HHS
- Breitbart 4/28 <u>Donald Trump Appoints Pro-Life Advocate as Assistant</u> Secretary of HHS for Public Affairs
- The Independent (UK) 4/28 <u>Trump appoints leading anti-abortion activist to senior role in health department</u>
- LifeSiteNews 4/28 <u>BREAKING</u>: Trump appoints pro-life leader to top Health and Human Services spot
- Opposing Views 4/28 <u>Trump Appoints Anti-Abortion Activist To Senior Post</u>

- The Washington Post 4/28 <u>Trump appoints antiabortion champion to HHS</u> post
- WORLD Magazine 4/28 <u>Trump appoints pro-life leader to HHS</u>
- CBN 4/30 <u>Trump Tags Pro-Life Leader for Big Post</u>, <u>Predecessor Heads to Abortion Giant</u>
- CNN 4/30 Trump taps anti-abortion leader for top health agency post
- The Christian Post 5/1 <u>Pro-Lifers Praise Trump Appointment of Fellow</u> Activist to HHS
- EWTN News Nightly 5/1https://www.youtube.com/watch?v=69N-CA2cSmc
- The New American 5/1 <u>Pro-life Leader Charmaine Yoest Named to HHS</u> Post

Teresa Manning

- LifeSiteNews 5/2 <u>Trump appoints pro-life lawyer to lead 'family planning'</u> programs
- The Washington Post 5/2 <u>Trump picks antiabortion activist to head HHS family planning section</u>

Both

 Huffington Post 5/1 <u>Donald Trump Taps Anti-Contraceptive Activist To</u> Oversee Family Planning Program

Sent from my iPhone

 From:
 Stirrup, Heidi (HHS/IOS)

 Sent:
 3 May 2017 09:32:02 +0000

To: Autumn Christensen

Subject: Re: Media

You are the best! Thank you so much.

Heidi Stirrup Office of White House Liaison U.S. Department of Health and Human Services 202-868-9828

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Charmaine Yoest

- AP 4/28 TRUMP NAMES ANTI-ABORTION LEADER TO HIGH POST AT HHS
- Breitbart 4/28 <u>Donald Trump Appoints Pro-Life Advocate as Assistant Secretary</u> of HHS for Public Affairs
- The Independent (UK) 4/28 <u>Trump appoints leading anti-abortion activist to senior role in health department</u>
- LifeSiteNews 4/28 <u>BREAKING</u>: Trump appoints pro-life leader to top Health and Human Services spot
- Opposing Views 4/28 Trump Appoints Anti-Abortion Activist To Senior Post
- The Washington Post 4/28 Trump appoints antiabortion champion to HHS post
- WORLD Magazine 4/28 Trump appoints pro-life leader to HHS
- CBN 4/30 <u>Trump Tags Pro-Life Leader for Big Post, Predecessor Heads to</u> Abortion Giant
- CNN 4/30 Trump taps anti-abortion leader for top health agency post
- The Christian Post 5/1 <u>Pro-Lifers Praise Trump Appointment of Fellow Activist</u> to HHS
- EWTN News Nightly 5/1https://www.youtube.com/watch?v=69N-CA2cSmc
- The New American 5/1 Pro-life Leader Charmaine Yoest Named to HHS Post

Teresa Manning

- LifeSiteNews 5/2 <u>Trump appoints pro-life lawyer to lead 'family planning' programs</u>
- The Washington Post 5/2 <u>Trump picks antiabortion activist to head HHS family planning section</u>

Both

• Huffington Post 5/1 <u>Donald Trump Taps Anti-Contraceptive Activist To Oversee</u> Family Planning Program

Sent from my iPhone

From: Boyce, Lucas

Sent: 4 Dec 2017 16:52:12 +0000

To: Clark, Timothy (HHS/IOS);Stirrup, Heidi (HHS/IOS)

Cc: Binion, Thomas

Subject: RE: Meetings With The Department of Health & Human Services RE: Heritage

Foundation Mandate For Leadership

Hi Mr. Clark and Ms. Stirrup.

I hope you had a great thanksgiving break.

I wanted to follow up and see if you might be willing to assist us in setting up meetings.

Would it be possible to hop on a conference call to explain further what we are hoping to do?

Lucas Boyce

Senior Advisor for Executive Branch Relations
The Heritage Foundation
214 Massachusetts Avenue, NE
Washington, DC 20002
202-546-4400
heritage.org

From: Clark, Timothy (HHS/IOS) [mailto:Timothy.Clark1@hhs.gov]

Sent: Monday, November 13, 2017 1:32 PM

To: Boyce, Lucas <Lucas.Boyce@heritage.org>; Stirrup, Heidi (HHS/IOS) <Heidi.Stirrup@hhs.gov> **Subject:** RE: Meetings With The Department of Health & Human Services RE: Heritage Foundation

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<Heidi.Stirrup@hhs.gov>

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Senior Advisor for Executive Branch Relations The Heritage Foundation 214 Massachusetts Avenue, NE Washington, DC 20002 202-546-4400

heritage.org

From: Boyce, Lucas

Sent: Thursday, November 2, 2017 11:14 AM

To: Timothy.Clark1@hhs.gov; Heidi.Stirrup@hhs.gov

Cc: Fishpaw, Marie < Marie. Fishpaw@heritage.org >; Kao, Emilie < Emilie. Kao@heritage.org >; Binion,

Thomas <Thomas.Binion@heritage.org>

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Non Responsive Record					

From: Boyce, Lucas [mailto:Lucas.Boyce@heritage.org]

Sent: Thursday, November 02, 2017 11:14 AM

To: Clark, Timothy (HHS/IOS); Stirrup, Heidi (HHS/IOS)

Cc: Fishpaw, Marie; Kao, Emilie; Binion, Thomas

Subject: Meetings With The Department of Health & Human Services RE: Heritage Foundation

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Senior Advisor for Executive Branch Relations
The Heritage Foundation
214 Massachusetts Avenue, NE
Washington, DC 20002
202-546-4400
heritage.org

From: Boyce, Lucas

Sent: 14 Nov 2017 14:06:25 +0000

To: Clark, Timothy (HHS/IOS);Stirrup, Heidi (HHS/IOS)

Subject: RE: Meetings With The Department of Health & Human Services RE:

Heritage Foundation Mandate For Leadership

yes sir. Thank you.

Lucas Boyce

Senior Advisor for Executive Branch Relations
The Heritage Foundation
214 Massachusetts Avenue, NE
Washington, DC 20002
202-546-4400
heritage.org

From: Clark, Timothy (HHS/IOS) [Timothy.Clark1@hhs.gov]

Sent: Monday, November 13, 2017 1:32 PM **To:** Boyce, Lucas; Stirrup, Heidi (HHS/IOS)

Subject: RE: Meetings With The Department of Health & Human Services RE: Heritage

Foundation Mandate For Leadership

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From: Boyce, Lucas [mailto:Lucas.Boyce@heritage.org]

Sent: Monday, November 13, 2017 8:49 AM

To: Clark, Timothy (HHS/IOS) <Timothy.Clark1@hhs.gov>; Stirrup, Heidi (HHS/IOS)

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heritage.org

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From: Clark, Timothy (HHS/IOS)
Sent: 13 Nov 2017 18:32:03 +0000

To: Boyce, Lucas; Stirrup, Heidi (HHS/IOS)

Subject: RE: Meetings With The Department of Health & Human Services RE: Heritage

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Lucas Boyce

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From: Boyce, Lucas

Sent: 13 Nov 2017 13:48:34 +0000

To: Clark, Timothy (HHS/IOS);Stirrup, Heidi (HHS/IOS)

Subject: RE: Meetings With The Department of Health & Human Services RE: Heritage

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Cc: Fishpaw, Marie <Marie.Fishpaw@heritage.org>; Kao, Emilie <Emilie.Kao@heritage.org>; Binion,

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From: Boyce, Lucas

Sent: 6 Dec 2017 20:57:06 +0000

To: Clark, Timothy (HHS/IOS);Stirrup, Heidi (HHS/IOS);Ashendorf, Jacob (HHS/IOS)

Cc: Binion, Thomas

Subject: RE: Meetings With The Department of Health & Human Services RE: Heritage

Foundation Mandate For Leadership

Thank you very much. We are grateful for your help.

Lucas Boyce

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The Heritage Foundation
214 Massachusetts Avenue, NE
Washington, DC 20002
202-546-4400
heritage.org

From: Clark, Timothy (HHS/IOS) [mailto:Timothy.Clark1@hhs.gov]

Sent: Wednesday, December 6, 2017 3:42 PM

To: Boyce, Lucas <Lucas.Boyce@heritage.org>; Stirrup, Heidi (HHS/IOS) <Heidi.Stirrup@hhs.gov>;

Ashendorf, Jacob (HHS/IOS) <Jacob.Ashendorf@hhs.gov>

Cc: Binion, Thomas <Thomas.Binion@heritage.org>

Subject: RE: Meetings With The Department of Health & Human Services RE: Heritage Foundation

Mandate For Leadership

Yes. Jacob Ashendorf from our office can work to schedule.

From: Boyce, Lucas [mailto:Lucas.Boyce@heritage.org]

Sent: Monday, December 4, 2017 11:52 AM

To: Clark, Timothy (HHS/IOS) <Timothy.Clark1@hhs.gov>; Stirrup, Heidi (HHS/IOS)

<Heidi.Stirrup@hhs.gov>

Cc: Binion, Thomas < Thomas.Binion@heritage.org>

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From: Clark, Timothy (HHS/IOS) [mailto:Timothy.Clark1@hhs.gov]

Sent: Monday, November 13, 2017 1:32 PM

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Would you be able to assist us with the contact information including email and phone number for decision makers that have jurisdiction over the above issues areas/offices?

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Sincerely,

Lucas

P.S....

Mandate for Leadership: A Comprehensive Policy Agenda for a New Administration

Heritage Releases Final Volume in 2016 "Mandate for Leadership" Series

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Heritage believes the personnel serving in the Trump Administration would benefit from the compiled research and recommendations.

Lucas Boyce

Senior Advisor for Executive Branch Relations 202-546-4400

Non-Responsive Record		

From: Jeanne Mancini [mailto:jeannefmancini@marchforlife.org]

Sent: Tuesday, October 17, 2017 3:18 PM

To: Stirrup, Heidi (HHS/IOS) **Subject:** Please Join Us!



Dear Mr. and Mrs. Stirrup,

We would be delighted to have you join us on the evening of November 9th for a reception in support and celebration of the March for Life.

Please see the attached invitation with more details.

Looking forward to seeing you, Jeanne F. Marcini

Jeanne Mancini

President, March for Life Education and Defense Fund

From: Billy Valentine

Sent: 13 Apr 2017 17:27:06 +0000

To: Stirrup, Heidi (HHS/IOS); Marjorie Dannenfelser

Subject: RE: President Donald J. Trump Signs H.J.Res. 43 into Law

Heidi, thank you - great news indeed!

Marjorie stood next to the President as he signed it into law – check out the pic here: https://twitter.com/SBAList/status/852566213796536321

From: Stirrup, Heidi (HHS/IOS) [mailto:Heidi.Stirrup@hhs.gov]

Sent: Thursday, April 13, 2017 1:22 PM

To: Marjorie Dannenfelser <mdannenfelser@SBA-LIST.ORG>; Billy Valentine <bvalentine@SBA-

LIST.ORG>

Subject: FW: President Donald J. Trump Signs H.J.Res. 43 into Law

FYI

From: White House Press Office [mailto:whitehouse-noreply@messages.whitehouse.gov]

Sent: Thursday, April 13, 2017 12:28 PM

To: Stirrup, Heidi (HHS/IOS)

Subject: President Donald J. Trump Signs H.J.Res. 43 into Law

THE WHITE HOUSE Office of the Press Secretary

FOR IMMEDIATE RELEASE April 13, 2017

On Thursday, April 13, 2017, the President signed into law:

H.J.Res. 43, which nullifies the Department of Health and Human Services rule prohibiting recipients of Title X grants for the provision of family planning services from excluding a subgrantee from participating for reasons other than its ability to provide Title X services.

###

Unsubscribe

The White House · 1600 Pennsylvania Avenue, NW · Washington DC 20500 · 202-456-1111

From:	Stirrup, Heidi (HHS/IOS)
Sent:	16 Jan 2018 21:38:12 +0000
To:	bridgett.wagner@heritage.org
Subject:	Resume and Follow-Up
Attachments:	Resume (January 2018).docx
Greetings, Bridget:	
Hope this message	e finds you well.
together and have in VA in May, 2018	friends of (b) and mine – the (b)(6) — as their sons attended third grade been friends ever since. He is expecting to graduate from William & Mary University and is very interested in a possible internship or position with Heritage. I would be if someone would follow-up with (b) and discuss any possibilities.
With kind regards,	
Heidi Stirrup Office of White Ho U.S. Department o 202-868-9828	ouse Liaison f Health and Human Services
Non-Responsive Record	

From: Mail Delivery System

Sent: 16 Jan 2018 16:36:40 -0500
To: bridget.wagner@heritage.org

Subject: Undeliverable: Resume and Follow-Up

Attachments: FW: Resume and Follow-Up

The following message to

bridget.wagner@heritage.org> was undeliverable.

The reason for the problem:

5.1.0 - Unknown address error 550-'Invalid Recipient - https://community.mimecast.com/docs/DOC-1369#550'

From: Stirrup, Heidi (HHS/IOS)
Sent: 16 Jan 2018 21:36:36 +0000
To: bridget.wagner@heritage.org
Subject: FW: Resume and Follow-Up

From: Stirrup, Heidi (HHS/IOS)
Sent: 22 Feb 2018 18:30:15 +0000
To: bridgett.wagner@heritage.org

Subject: Executive Scheduler

Dear Bridgett:

You may be at CPAC – hoping you can help me with my search for an Executive Scheduler for the Secretary, Alex M. Azar II.

We are looking for an executive scheduler for HHS Secretary Azar who is not only experienced at scheduling, but also has the added experience of strategically understanding how best to allocate the Secretary's limited time.

Qualities such as discernment, judgment, organization, multi-tasking, attention to details and an ability to manage with a personable demeanor are all key. If you know of suitable candidates, please send them my way. Thank you!

Sincerely

Heidi Stirrup Office of White House Liaison U.S. Department of Health and Human Services 202-868-9828

Non-Responsive Record		
Non-Responsive Record		
Non-Responsive Record		

From: Dunlop, Becky Norton [mailto:bndunlop@heritage.org]
Sent: Friday, February 17, 2017 4:39 PM

To: Clark, Timothy (HHS/IOS); Stirrup, Heidi (HHS/IOS) **Subject:** RE: Heritage's HHS candidates and resumes, as promised.

Becky Norton Dunlop

Ronald Reagan Distinguished Fellow The Heritage Foundation 214 Massachusetts Avenue, NE Washington, DC 20002 202-546-4400

heritage.org

From: Clark, Timothy (HHS/IOS) [mailto:Timothy.Clark1@hhs.gov]

Sent: Friday, February 17, 2017 4:01 PM

To: Stirrup, Heidi (HHS/IOS); Dunlop, Becky Norton; Dutcher, Victoria **Subject:** Heritage's HHS candidates and resumes, as promised.

Hello Becky and Vicky,

Is it possible to resend this file? I was asking our team to download this, and the file has expired.

n-Responsive Record	

 From:
 Stirrup, Heidi (HHS/IOS)

 Sent:
 13 Apr 2017 17:55:23 +0000

To: Billy Valentine; Marjorie Dannenfelser

Subject: RE: President Donald J. Trump Signs H.J.Res. 43 into Law

Wow! What a great photo! Elections do have consequences. Great work, all the way around! Thank you for sharing.

From: Billy Valentine [mailto:bvalentine@SBA-LIST.ORG]

Sent: Thursday, April 13, 2017 1:27 PM

To: Stirrup, Heidi (HHS/IOS); Marjorie Dannenfelser

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LIST.ORG>

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FYL

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Unsubscribe

The White House · 1600 Pennsylvania Avenue, NW · Washington DC 20500 · 202-456-1111

Non-Responsive Record

From: Boyce, Lucas [mailto:Lucas.Boyce@heritage.org]

Sent: Tuesday, November 14, 2017 9:06 AM

To: Clark, Timothy (HHS/IOS) <Timothy.Clark1@hhs.gov>; Stirrup, Heidi (HHS/IOS)

<Heidi.Stirrup@hhs.gov>

Subject: RE: Meetings With The Department of Health & Human Services RE: Heritage Foundation

Mandate For Leadership

yes sir. Thank you.

Lucas Boyce

Senior Advisor for Executive Branch Relations
The Heritage Foundation
214 Massachusetts Avenue, NE
Washington, DC 20002
202-546-4400
heritage.org

From: Clark, Timothy (HHS/IOS) [Timothy.Clark1@hhs.gov]

Sent: Monday, November 13, 2017 1:32 PM **To:** Boyce, Lucas; Stirrup, Heidi (HHS/IOS)

Subject: RE: Meetings With The Department of Health & Human Services RE: Heritage Foundation

Mandate For Leadership

Thanks for the note. We'll get back to you shortly.

From: Boyce, Lucas [mailto:Lucas.Boyce@heritage.org]

Sent: Monday, November 13, 2017 8:49 AM

To: Clark, Timothy (HHS/IOS) <Timothy.Clark1@hhs.gov>; Stirrup, Heidi (HHS/IOS)

<Heidi.Stirrup@hhs.gov>

Subject: RE: Meetings With The Department of Health & Human Services RE: Heritage Foundation

Mandate For Leadership

Hi Timothy and Heidi.

I hope all is well. Would you be able to help with the below query? I'm happy to hop on a quick phone call to provide additional information for consideration.

We are grateful for anything you might be able to do.

Lucas Boyce

Senior Advisor for Executive Branch Relations The Heritage Foundation 214 Massachusetts Avenue, NE Washington, DC 20002 202-546-4400

heritage.org

From: Boyce, Lucas

Sent: Thursday, November 2, 2017 11:14 AM

To: Timothy.Clark1@hhs.gov; Heidi.Stirrup@hhs.gov

Cc: Fishpaw, Marie < Marie. Fishpaw@heritage.org >; Kao, Emilie < Emilie. Kao@heritage.org >; Binion,

Thomas <Thomas.Binion@heritage.org>

Subject: Meetings With The Department of Health & Human Services RE: Heritage Foundation

Mandate For Leadership

Good morning Timothy and Heidi,

I serve as a Senior Advisor for Executive Branch Relations at the Heritage Foundation.

I'm reaching out on behalf of the Heritage Foundation to ask your help in setting up appointments to meet with key personnel at the department.

Heritage Foundation's research analysts and thought leaders have crafted a series of policy recommendations compiled into five bodies of work entitled: **The Mandate For Leadership.** Some more information about the Mandate is below for your review.

With this in mind we are asking for your help in connecting us with the a appropriate agency staff/ political appointees that could benefit from our policy experts' research.

With your assistance we'd like to set up meetings with appointees or policy staff that have jurisdiction over the following issue areas.

Issue Areas/Recommendations

- Welfare Reform Across Means Tested Programs
- Implementation of ACA
- Preventative Services Requirements
- ACA Risk Corridor Program Funding

Would you be able to assist us with the contact information including email and phone number for decision makers that have jurisdiction over the above issues areas/offices?

The Heritage Foundation is grateful for any help and guidance you are able to provide.

Sincerely,

Lucas

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Senior Advisor for Executive Branch Relations 202-546-4400

From:	Stirrup, Heidi (HHS/IOS)
Sent:	16 Jan 2018 21:36:36 +0000
То:	bridget.wagner@heritage.org
Subject:	FW: Resume and Follow-Up
Attachments:	Resume (January 2018).docx
Greetings, Bridget	
Hope this message	e finds you well.
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With kind regards	,
Heidi Stirrup	
Office of White H	
	of Health and Human Services

Non-Responsive Record		

 From:
 Stirrup, Heidi (HHS/IOS)

 Sent:
 6 Oct 2017 16:01:56 +0000

To: Autumn Christensen (AChristensen@sba-list.org)

Subject: FW: Trump Administration Issues Rules Protecting the Conscience Rights of All

Americans

From: HHS Office Of Public Affairs [mailto:hhsopa@hhs.gov]

Sent: Friday, October 06, 2017 11:17 AM

To: Stirrup, Heidi (HHS/IOS)

Subject: Trump Administration Issues Rules Protecting the Conscience Rights of All Americans



News Release

U.S. Department of Health and Human Services

202-690-6343 media@hhs.gov www.hhs.gov/news Twitter @HHSMedia

FOR IMMEDIATE RELEASE

Friday, October 6, 2017

Trump Administration Issues Rules Protecting the Conscience Rights of All Americans

The Departments of Health and Human Services, Treasury, and Labor are announcing two companion interim final rules that provide conscience protections to Americans who have a religious or moral objection to paying for health insurance that covers contraceptive/abortifacient services. Obamacare-compliant health insurance plans are required to cover "preventive services," a term defined through regulation. Under the existing regulatory requirements created by the previous administration, employers, unless they qualify for an exemption, must offer health insurance that covers all FDA-approved contraception, which includes medications and devices that may act as abortifacients as well as sterilization procedures.

Under the first of two companion rules released today, entities that have sincerely held religious beliefs against providing such services would no longer be required to do so. The second rule applies the same protections to organizations and small businesses that have objections on the basis of moral conviction which is not based in any particular religious belief.

In May, President Trump issued an "Executive Order Promoting Free Speech and Religious Liberty" in which the President directed the Secretaries of Health and Human

Services, Labor and the Treasury to consider amending existing regulations relative to Obamacare's preventive-care mandate in order to address conscience-based objections.

Key facts about today's interim final rules:

- The regulations exempt entities only from providing an otherwise mandated item to which they object on the basis of their religious beliefs or moral conviction.
- The regulation leaves in place preventive services coverage guidelines where no religious or moral objection exists meaning that out of millions of employers in the U.S., these exemptions may impact only about 200 entities, the number that that filed lawsuits based on religious or moral objections.
 - These rules will not affect over 99.9% of the 165 million women in the United States.
- Current law itself already exempts over 25 million people from the preventive-care
 mandate because they are insured through an entity that has a health insurance plan
 that existed prior to the Obamacare statute.
- The regulations leave in place government programs that provide free or subsidized contraceptive coverage to low income women, such as through community health centers.
- These regulations do not ban any drugs or devices.

The mandate as defined by the previous administration suffered defeats in court after court, including the Supreme Court, which ruled that the government cannot punish business owners for their faith.

###

Connect with HHS and sign up for HHS email updates



If you would rather not receive future communications from U.S. Department of Health and Human Services (HHS), let us know by clicking <u>here.</u>

U.S. Department of Health and Human Services (HHS), 200 Independence Avenue, SW 6th Floor Room 647-D, Washington, DC 20201 United States

From: Boyce, Lucas

Sent: 2 Nov 2017 15:13:58 +0000

To: Clark, Timothy (HHS/IOS);Stirrup, Heidi (HHS/IOS)
Cc: Fishpaw, Marie;Kao, Emilie;Binion, Thomas

Subject: Meetings With The Department of Health & Human Services RE: Heritage

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Lucas Boyce

Senior Advisor for Executive Branch Relations
The Heritage Foundation
214 Massachusetts Avenue, NE
Washington, DC 20002
202-546-4400
heritage.org

From: Office of the Executive Secretary Master Calendar (HHS/OS)

Sent: 7 Jun 2017 22:27:31 +0000

Office of the Executive Secretary Master Calendar (HHS/OS); Skrzycki, To: Kristin (HHS/IOS);Gartland, Molly (HHS/IOS);Stannard, Paula (HHS/IOS);Lenihan, Keagan (HHS/IOS);Brooks, John (HHS/IOS);Lapinski, Mary-Sumpter (HHS/IOS);Wynne, Maggie (HHS/IOS);Schaefer, Nina (HHS/IOS);Street, Amanda (HHS/IOS);Stevenson, Sarah-Lloyd (HHS/IOS); Bell, Kathryn (HHS/IOS); Caliguiri, Laura (HHS/IOS); Greenstein, Bruce (OS/IOS); Agnew, Ann (HHS/IOS);Cotter, Janice (HHS/IOS);Pelekoudas, Kristina (HHS/IOS);Malliou, Ekaterini (OS/IOS);Stirrup, Heidi (HHS/IOS);Mansdoerfer, David (HHS/IOS);Bird, Catherine (HHS/IOS);Conrad, Patricia (HHS/IOS);Martinez, Cecilia (OS/IOS);Harrison, Jessica (OS/IOS);Lagomarsino, Katie (OS/IOS);Cordova, Jon (OS/ASA);Moughalian, Jen (HHS/ASFR); Arbes, Sarah (HHS/ASL); Aramanda, Alec (OS/ASL); Palmer, Ashley (HHS/ASL);Lawrence, Courtney (HHS/ASL);Morse, Sara (HHS/ASL);Hayes, Sean (HHS/ASL);Lloyd, Matt (OS/ASPA); Murphy, Ryan (OS/ASPA); Marre, Alleigh (OS/ASPA); O'Brien, John (HHS/ASPE);Trueman, Laura (HHS/IEA);Manning, Teresa (HHS/OASH);Bell, March (HHS/OCR); Flick, Heather (OS/OGC); Bowman, Matthew (HHS/OGC); Cleary, Kelly (HHS/OGC); Alexander, Thomas (OS/OGA); Lucas, Jane (HHS/IOS); Morris, Genevieve (OS/ONC/IO);Fleming, John (OS/ONC);Pilato, Anna (ACF);Tignor, Beth (HHS/IOS);Balenger, Juanita (HHS/IOS); Kouzoukas, Demetrios (CMS/OA); Pate, Randy (CMS/CCIIO); Abram, Anna (FDA/OC); Kalavritinos, Jack (FDA/OC); Korch, George (OS/ASPR/IO); Gabriel, Edward (OS/ASPR/IO); Bright, Rick (OS/ASPR/BARDA); Phillips, Sally (HHS/ASPR/OPP); Scarbrough, Jess (OS/ASPR/AMCG); Petillo, Jay (OS/ASPR/OFPA); Michael, Gretchen (OS/ASPR/COO); Fantinato,

Cc: Hawkins, Jamar (HHS/OS)

Subject: Briefing for HHS Political Staff: ASPR 101 & Continuity of Operations

Jessica (OS/ASPR/OEM);Boyce, Don (OS/ASPR/OEM);Stephan, Briana (OS/ASPR/IO);Weinberger,

Plan (COOP) ** MATERIALS, ATTACHED**

Attachments: Briefing Paper - ASPR 101.pptx, Briefing Paper - COOP.pptx

Briefing for HHS Political Staff

Collin (OS/ASPR/IO) (CTR)

Event Name: ASPR 101 and COOP Briefing

Location: Thomas P. O'Neill Jr. Federal Building, Willow Room on Lower Level,

200 C St SW, Washington, DC 20024 (behind the Humphrey Building)

Date & Time: Tuesday, June 13, 2017, 3-4pm

Topic: ASPR 101 & Continuity of Operations Plan (COOP)

Briefing Materials: Attached

×

Reason: ASPR will brief the Secretary's policy team and deputy-level political staff on the role of the Office of the Assistant Secretary for Preparedness and Response (ASPR) and the Department's Continuity of Operations Plan (COOP).

Note: Please note that the Secretary, Chief of Staff, and the heads of HHS agencies have already been briefed or will be briefed and do not need to attend.

Introduction: The Office of the Assistant Secretary for Preparedness and Response (ASPR)

ASPR focuses on preparedness planning and response; building federal emergency medical operational capabilities; countermeasures research, advance development, and procurement; and grants to strengthen the capabilities of hospitals and health care systems in public health emergencies and medical disasters. The office provides federal support, including medical professionals through ASPR's National Disaster Medical System, to augment state and local capabilities during an emergency or disaster. The Biomedical Advanced Research and Development Authority (BARDA), within the Office of the Assistant Secretary for Preparedness and Response in the U.S. Department of Health and Human Services, provides an integrated, systematic approach to the development and purchase of the necessary vaccines, drugs, therapies, and diagnostic tools for public health medical emergencies.

Introduction: ASPR Continuity of Operations (COOP)

The National Continuity Policy Implementation Plan (NCPIP) and the National Security Presidential Directive- 51/Homeland Security Presidential Directive- 20 (NSPD-51/HSPD-20), is an effort within individual executive departments and agencies to ensure that Primary Mission Essential Functions (PMEFs) continue to be performed during a wide range of emergencies, including localized acts of nature, accidents and technological or attack-related emergencies.

Briefing Agenda:

0 minutes: ASPR 101 - Dr. George Korch, Ed Gabriel, Rick Bright,

Sally Phillips, JessScarborough, Jay Petillo, Gretchen Michael

20 minutes: COOP – Edward Gabriel, Jessica Fantinato, Don Boyce

20 minutes: Questions & Answers

Lead: Dr. George Korch, Acting ASPR

Event POC: Dr. Ekaterini (Kat) Malliou, 202-286-4549, Ekaterini.Malliou@hhs.gov

Participants:

Office of

the Chief of Kris Skrzycki, Molly Gartland

Staff

Office of Paula Stannard, Keagan Lenihan, John Brooks, Mary-Sumpter Lapinski,

Counselors Maggie Wynne, Nina Schaefer, Amanda Street, Sarah-Lloyd Stevenson,

Kathryn Bell, Laura Caliguiri, Bruce Greenstein

Executive Ann Agnew, Executive Secretary

Secretariat Janice Cotter, Director

	Kristina Pelekoudas, Briefing Coordinator
White House Liaison Scheduling and Advance Office	Heidi Stirrup, Deputy Director David Mansdoerfer, Director of Boards & Commissions Catherine Bird, Advisor Patty Conrad, Director of Scheduling Cecilia Martinez, Director of Advance Jessica Harrison, Deputy Director Katie Lagomarsino, Trip Coordinator
ASA	Jon Cordova, Principal Deputy Assistant Secretary
ASFR	Jen Moughalian, Principal Deputy Assistant Secretary
ASL	Sarah Arbes, Principal Deputy Assistant Secretary Alec Aramanda, Deputy Assistant Secretary for Health Policy Ashley Palmer, Deputy Assistant Secretary for Health Care Reform Courtney Lawrence, Deputy Assistant Secretary for Human Services Laura Kemper-Holland, Deputy Assistant Secretary for Public Health and Science Sara Morse, Deputy Assistant Secretary for Congressional Liaison Sean Hayes, Director for Oversight and Investigations
ASPA	Matt Lloyd, Principal Deputy Assistant Secretary Ryan Murphy, Deputy Assistant Secretary Alleigh Marre, Chief Spokesperson
ASPE	John O'Brien, Deputy Assistant Secretary for Health Policy
IEA	Laura Trueman, Deputy Director
OASH	Teresa Manning, Deputy Assistant Secretary for Population Affairs
OCR	Thomas March Bell, Chief of Staff
OGC	Heather Flick, Deputy General Counsel Matt Bowman, Deputy General Counsel Kelly Cleary, Deputy General Counsel
OGA	Thomas Alexander, Principal Deputy Assistant Secretary
OHR	Jane Lucas, Deputy Director
ONC	Genevieve Morris, Principal Deputy National Coordinator John Fleming, Deputy Assistant Secretary
ACF	Anna Pilato, Deputy Assistant Secretary
ACL	Beth Tignor, Policy Advisor for the Commissioner of the Administration on Disabilities Juantita Balenger, Advisor

	Demetrios Kouzoukas, Principal Deputy Admin and Director, Center for
CMS	Medicare
	Randy Pate, Deputy Administrator and Director of CCIIO
FDA	Anna Abram, Deputy Commissioner for Policy, Planning, Legislation, and
	Analysis
	Jack Kalavritinos, Associate Commissioner for External Affairs

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of the Freedom of Informat	ion Act	

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From:	DeputySecretary (OS/IOS)
Sent:	26 Feb 2018 19:05:45 +0000
То:	DeputySecretary (OS/IOS);EDH (OS/IOS);Caliguiri, Laura
(HHS/IOS); Moreno, R	afael (HHS/ASA);Callahan, Kenneth (HHS/IOS);Stirrup, Heidi
(HHS/IOS);Clark, Time	othy (HHS/IOS);Ashendorf, Jacob (HHS/IOS);Brady, Will (HHS/IOS)
Subject:	EDH Interview Review with WHL
Attachments:	RESUME.DOCX, (b)(6) by Resume.pdf(b)(6)
Resume.pdf, (b)(6)	pdf, Resume - 2017 - (b)(6)docx
(b)(6) 2. (b)(6)	candidate for ASPA candidate for ASPA – assistant speechwriter
3. (b)(6) 4. (b)(6) 5. (b)(6) Secre	TIL TIL TILL OF THE OFFICE AND THE O

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of the Freedom of Information Act

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of the Freedom of Information Act

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of the Freedom of Information Act

 From:
 Stirrup, Heidi (HHS/IOS)

 Sent:
 16 Feb 2017 13:16:03 +0000

 To:
 Stirrup, Heidi (HHS/IOS)

Subject: House Judiciary Subcmte on Constitution and Civil Justice re: Religious

Liberty in America

Religious Liberty in America

House Judiciary — Subcommittee on Constitution and Civil Justice

Subcommittee Hearing

Date

Add to my calendar(You are already tracking this event)

Constitution and Civil Justice Subcommittee (Chairman Steve King, R-Iowa) of House Judiciary Committee hearing on "The State of Religious Liberty in America."

Thursday, Feb. 16, 1 p.m.

Place 2141 Rayburn Bldg.

Kim Colby, director of the Christian Legal Society's Center for Law and Religious Freedom

Hannah Smith, senior counsel at Becket

Witnesse Rabbi David Saperstein

Casey Mattox, senior counsel at the Alliance Defending Freedom's Center for Academic

Freedom

From: Munson, Aaron (OS/IOS) on behalf of Clark, Timothy (HHS/IOS)

Sent: 7 Aug 2017 16:56:03 +0000

To: (b)(6) @gmail.com;Stirrup, Heidi (HHS/IOS)

Subject: Interview: (b)(6)Attachments: (b)(6) pdf

Your meeting with Tim Clark and Heidi Stirrup is confirmed on <u>Wednesday</u>, <u>August 9</u>, <u>2017</u> @ <u>11:00</u> <u>a.m.</u> In preparation for this meeting, please find the following information:

Hubert H. Humphrey Building
U.S. Department of Health & Human Services (HHS)
Immediate Office of the Secretary
200 Independence Avenue, SW
Washington, D.C. 20201

- If arriving by public transit, please take the orange or blue line trains to the Federal
 Center SW metro station. When exiting the station, please walk two blocks (toward the
 National Mall) and the Hubert Humphrey Building will be at your immediate right.
 Please enter the building through the Independence Avenue entrance and present two
 forms of identification.
- If arriving by taxi, please enter the building through the Independence Avenue entrance and present one current form of valid ID (Passport, License, or State Issued ID)
- If arriving by personal vehicle; meter parking is available for your convenience on each side of the building.

Please plan to arrive within 15-minutes of the scheduled appointment.

Once you have signed in, <u>please have the front desk call 202-690-6625</u>. Please do not hesitate to contact our office should you have any questions.



Page 170
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(b)(6)

 From:
 Stirrup, Heidi (HHS/IOS)

 Sent:
 30 Jan 2018 16:55:31 +0000

To: Stirrup, Heidi (HHS/IOS);Clark, Timothy

(HHS/IOS);(b)(6) @gmail.com

Subject: Interview with (b)(6) re: possible position with ASPA

Attachments: (b)(6) Resume 2017.pdf

Your interview with Tim Clark and Heidi Stirrup, Office of White House Liaison is confirmed for <u>Thursday</u>, <u>February 1</u>, <u>2018</u> @ <u>11:00 a.m.</u> In preparation for this meeting, please find the following information:

Hubert H. Humphrey Building
U.S. Department of Health & Human Services (HHS)
White House Liaison Office – Room 625D
200 Independence Avenue, SW
Washington, D.C. 20201

- If arriving by public transit, please take the orange or blue line trains to the Federal
 Center SW metro station. When exiting the station, please walk two blocks (toward the
 National Mall) and the Hubert Humphrey Building will be at your immediate right.
 Please enter the building through the Independence Avenue entrance and present two
 forms of identification.
- If arriving by taxi, please enter the building through the Independence Avenue entrance and present one current form of valid ID (Passport, License, or State Issued ID)
- If arriving by personal vehicle; meter parking is available for your convenience on each side of the building.

Please plan to arrive within 15-minutes of the scheduled appointment.

Once you have signed in, **please have the front desk call 202-690-6625**. Please do not hesitate to contact our office should you have any questions.



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(b)(6)

 From:
 DeputySecretary (OS/IOS)

 Sent:
 1 Feb 2018 14:33:16 +0000

To: DeputySecretary (OS/IOS);Caliguiri, Laura (HHS/IOS);Brady, Will

(HHS/IOS);Moreno, Rafael (HHS/ASA);EDH (OS/IOS);Stirrup, Heidi (HHS/IOS);Ashendorf, Jacob

(HHS/IOS);Clark, Timothy (HHS/IOS)

Subject: (b)(6) Interview w/ Deputy Secretary Hargan Resume 2017.pdf

Topic: Deputy Secretary Hargan will interview (b)(6) for ASPA.

Location: Deputy Secretary's Office, 614-G

Time: 1:00 – 1:30 PM

Attendees: Deputy Secretary Hargan, Will Brady and (b)(6)



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(b)(6)

From:	Stirrup, Heidi (HHS/IOS)
Sent:	15 Mar 2017 12:43:25 +0000
To:	Stirrup, Heidi (HHS/IOS);Clark, Timothy (HHS/IOS)
Subject:	Lance/Tim meeting with Charmaine Yoest - candidate for A/S Public
Affairs	
meet with candida Public Affairs (the	the on the Secretary's schedule tomorrow – after 3:30 pmuntil late in the evening – to the Charmaine Yoest (pronounced Yost – rhymes with Post) for consideration as A/S for the replacement for (b)(6) who had to take herself out of consideration) She that at 3:30 pm.
Matt Lloyd has me years – her resume	et Charmaine; Wade Horn and Heidi Stirrup have known and worked with Charmaine for e is attached.
She was highly red	commended by (b)(6) with this note:
(b)(6)	
(b)(6)	

Heidi Stirrup Office of White House Liaison U.S. Department of Health and Human Services 202-868-9828 From: Stirrup, Heidi (HHS/IOS)
Sent: 10 Aug 2017 14:40:45 +0000
To: Stirrup, Heidi (HHS/IOS)
Subject: Lunch w/ AG Edwin Meese

Dear Heidi,

I wanted to personally reach out and invite you to a luncheon with your fellow White House Liaisons featuring former Reagan Attorney General Edwin Meese.

The lunch will provide an off-the-record opportunity to hear General Meese share his experience working to staff the Reagan Administration.

This private lunch is being held at The Heritage Foundation on Friday August 18th at 12:30 pm.

If you are able to join us, please RSVP to me at sean.mcmahon@heritage.org or (202) 608-6205.

Sean McMahon

SeanMcMahon

Manager, Executive Branch Outreach and Candidate Briefing Program
The Heritage Foundation
214 Massachusetts Avenue, NE
Washington, DC 20002
202-608-6205
heritage.org

 From:
 Stirrup, Heidi (HHS/IOS)

 Sent:
 5 Jan 2018 21:55:04 +0000

 To:
 Stirrup, Heidi (HHS/IOS)

Subject: March for Life

 From:
 Stirrup, Heidi (HHS/IOS)

 Sent:
 21 Aug 2017 21:25:07 +0000

To: Autumn Christensen (AChristensen@sba-list.org)

Subject: Meet w/ Autumn

Your meeting was found to be out of date and has been automatically updated.

Sent by Microsoft Exchange Server

 From:
 Stirrup, Heidi (HHS/IOS)

 Sent:
 21 Aug 2017 20:12:43 +0000

To: Autumn Christensen (AChristensen@sba-list.org)

Subject: Meet w/ Autumn

DeputySecretary (OS/IOS)
15 Feb 2018 21:56:51 +0000
DeputySecretary (OS/IOS);EDH (OS/IOS);Clark, Timothy
i (HHS/IOS)(b)(6) /@gmail.com;Moreno, Rafael
nneth (HHS/IOS);Caliguiri, Laura (HHS/IOS);Brady, Will (HHS/IOS)
Melika interviews with Deputy Secretary Eric Hargan for Director of
PA
(b)(6) Resume.pdf

Your interview with the Deputy Secretary is now confirmed for <u>Wednesday</u>, <u>February 21, 2018 @ 9:00</u> <u>a.m.</u> In preparation for this meeting, please find the following information:

Hubert H. Humphrey Building
U.S. Department of Health & Human Services (HHS)
Immediate Office of the Secretary – Room 614G
200 Independence Avenue, SW
Washington, D.C. 20201

- If arriving by public transit, please take the orange or blue line trains to the Federal Center SW metro station. When exiting the station, please walk two blocks (toward the National Mall) and the Hubert Humphrey Building will be at your immediate right. Please enter the building through the Independence Avenue entrance and present two forms of identification.
- If arriving by taxi, please enter the building through the Independence Avenue entrance and present one current form of valid ID (Passport, License, or State Issued ID)
- If arriving by personal vehicle; meter parking is available for your convenience on each side of the building.

Please plan to arrive within 15-minutes of the scheduled appointment.

When you arrive, <u>please ask front desk to call Rafael Moreno 202-690-1053</u>. Please do not hesitate to contact our office should you have any questions.



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of the Freedom of Information Act

 From:
 Stirrup, Heidi (HHS/IOS)

 Sent:
 18 Jan 2018 19:28:51 +0000

 To:
 Stirrup, Heidi (HHS/IOS)

Subject: President addresses the March for Life

From:	Stirrup, Heidi (HHS/IOS)
Sent:	20 Jul 2017 20:09:57 +0000
То:	Stirrup, Heidi (HHS/IOS)
Subject: appointment	TO BE RESCHEDULED: Meeting with (b)(6) re: political
Attachments:	(b)(6) Resume 2017.pdf
×	
Dear Heidi,	
•	e Monday at 2 pm or Wednesday at 12 pm? I am more than happy to meet someplace else that is convenient for you.
I have attached a	copy of my resume and very much look forward to talking.
Kind regards,	
(b)(6)	1

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of the Freedom of Information Act

From: Autumn Christensen

Sent:21 Aug 2017 21:24:34 +0000To:Stirrup, Heidi (HHS/IOS)Subject:Accepted: Meet w/ Autumn

From:	Bullock, Kathleen M.
Sent:	6 Mar 2018 19:10:04 +0000
To:	Bullock, Kathleen M.;Bullock, Katja EOP/WHO;Doocey
(sean (b dooce)	(b)(6) ;Edward Corrigan;Joe Howell;Kilagan;Luke Beckmann;Lynch,
	exander(EOP/WHO;Spero, Casin (b) Todd Abrajano;Wright, Nicole
	nith@usdoj.gov;andrew.hughes@hud.gov;andrew(galkowski(b)(6) po
	dol.gov;brian.fauls@opic.gov;cabelkacb@state.gov;carly.miller@osec.usda.gov
	ov;Mansdoerfer, David @usaid.gov;doug.simon@dot.gov;garrison_griffin ^{(b)(6)} jesse.law@e
m.gov:joe.udd	o@hq.doe.gov;john.myers@treasury.gov;john.woodard@sba.gov;jonathan.w.d
	pv;lori_mashburn@ios.doi.gov;mciepielowski@neh.gov;michael.downing@gsa.
	ey@sd.mil;mike.korbey@ssa.gov;mmckinney@peacecorps.gov;munoz.charles@
	t@ustda.gov;richard.kingan@sba.gov;speroaf@mcc.gov;taylor(weyeneth@[[k
	mas.leinenkugel@va.gov;Clark, Timothy
	unlop@heritage.org;llagan, Kelly (EOP/WHO;Stirrup, Heidi
	n.barnes@gsa.gov;Duke, Hannah (b) EOP/WHO;Locetta, Jennifer (b)
	za, Sarah (Burley, Michae (b) Bucci, Kristine (EOP/WHO; Bacon, James () Miller
	HO;Feinberg, Rebecca (EOP/WHO;Bis, Justin (EOP/WHO;Bock, Carrie (
	es, Caroline EOP/WHO
Subject:	All WHLs/PPO mtg - Rescheduled

From: David Christensen

 Sent:
 14 Jul 2017 20:31:54 +0000

 To:
 Stannard, Paula (HHS/IOS)

Cc: David Christensen

Subject: FRC coalition letter re Collins and NIH polices on embryonic research

Attachments: FRC Coalition Letter on NIH-Collins w Signatures.pdf

Hey Paula,

I wanted to make sure you saw the attached coalition letter to Sec. Price signed by 44 groups concerned with current NIH funding of human embryo research and human/animal chimera research.

Thanks! David

David Christensen VP of Government Affairs Family Research Council 202-393-2100 general 202-637-4672 direct

(b)(6) cell

Secretary Thomas E. Price, M.D. U.S. Department of Health & Human Services 200 Independence Avenue, S.W. Washington, D.C. 20201

Dear Secretary Price,

We applaud President Donald Trump's actions in defense of human life, especially his restoration and expansion of the Mexico City Policy, his signing of legislation to allow states to remove Title X funding from abortion providers, his promises to protect religious freedom and conscience rights, and his numerous appointments of strong leaders that are pro-life and proscience, including yourself. We urge you to continue this Administration's defense of human dignity and promotion of sound science by reversing policies left over from former President Barack Obama's Administration at the National Institutes of Health (NIH) that endanger embryos and unborn children.

While we respect the Christian faith and scientific achievements of NIH Director Dr. Francis Collins, we are deeply concerned by his views on human life at the earliest stages. In particular, he has supported taxpayer funding for human embryo destructive research and aborted fetal tissue research. He has also supported human cloning, and proposed guidelines to fund human-animal chimera research.

In fact, since President Trump took office, Dr. Collins has approved 10 more embryonic stem cell lines, created by the destruction of young human embryos. This continues the Obama policy of providing taxpayer-funded incentives for the creation and destruction of human life. In FY17 alone, NIH funneled over \$300 million to unethical and ineffective research involving human embryonic stem cells and human fetal tissue. Despite Dr. Collins' personal views and past actions, it is critical that these Obama-era NIH policies be updated to be consistent with your and President Trump's strong commitments to respect human dignity and to intensify results-driven, patient-centered research.

We urge you to direct the NIH to take the following actions:

- Redirect scarce resources to prioritize research using cells obtained without destroying human life, and which show the greatest potential for near-term clinical benefit in human patients, such as adult stem cells, cord blood, induced pluripotent stem cells, and other cell technologies not involving the destruction or manufacture of human embryos;
- Prohibit NIH from conducting or financially supporting any research involving the destruction, discarding of, or risk of injury to, a human embryo, or the utilization of human embryonic stem cells;
- Prohibit NIH from conducting or financially supporting any basic research involving human fetal tissue that is obtained pursuant to an induced abortion;
- Create a registry of ethically obtained fetal tissue, derived from miscarriages, stillbirth and ectopic pregnancies, to support basic research; and

Withdraw the proposed changes to NIH guidelines which would allow funding for research
which attempts to create human-animal chimeras, including chimeras that may develop
substantially human cell-derived brains or the ability to produce human sperm or egg cells,
which can affect heredity.

Besides being unethical, research involving human embryonic stem cells or aborted fetal tissue simply yields poor results for clinical medical treatments. Moreover, human embryonic stem cells and human fetal tissue are not absolutely required for current research. Instead, NIH should redirect its limited taxpayer funds to prioritize research using other cells, such as adult and induced pluripotent stem cells, which are not only ethically obtained, but also have shown far more promise in clinical settings.

Human embryos and fetuses, as living members of the human species, are not raw materials to be exploited or commodities to be bought and sold. NIH funding of research involving aborted fetal tissue incentivizes the abortion industry's practice of harvesting and selling the organs of unborn children, as exposed by the Center for Medical Progress' undercover videos and the investigative work of the House Select Panel on Infant Lives and the Senate Judiciary Committee.

NIH must also close the door to human-animal chimera research that mixes human and animal brains and can affect human or animal heredity, both of which threaten to redefine what it means to be human.

We look forward to working with you and Dr. Collins to restore respect for human life and dignity at NIH, and to prioritize promising ethical research with the greatest potential for near-term clinical benefit in human patients.

Sincerely,

Tony Perkins President

Family Research Council

David Stevens, MD, MA (Ethics)

CEO

Christian Medical Association

Carol Tobias President

National Right to Life

Paul Weber President & CEO Family Policy Alliance Marjorie Dannenfelser

President

Susan B. Anthony List

Penny Young Nance CEO and President

Concerned Women for America

Tom McClusky President

March for Life Action

Catherine Glenn Foster President & CEO

Americans United for Life

Austin Ruse President C-fam

Terry Schilling Executive Director

American Principles Project

Roland C. Warren President and CEO

Care Net

Jonathan Imbody

Director Freedom2Care

C. Preston Noell III

President

Tradition, Family, Property, Inc

Jerry Cox President

Arkansas Family Council

Jim Minnery President

Alaska Family Action

Eric Teetsel

President & Executive Director Family Policy Alliance of Kansas

Jonathan Keller President

California Family Council

Mark Jorritsma

President & Executive Director

Family Policy Alliance of North Dakota

Michael Geer

President

Pennsylvania Family Institute

Kent Ostrander Executive Director

The Family Foundation (KY)

Jason J. McGuire Executive Director

New Yorkers for Constitutional Freedoms

Cole Muzio

President and Executive Director Family Policy Alliance of Georgia

Julaine K. Appling

President

Wisconsin Family Action

Joe Ortwerth
Executive Director

Missouri Family Policy Council

Nicole Theis President

Delaware Family Policy Council

Curt Smith President

Indiana Family Institute

Bob Vander Plaats President and CEO The Family Leader

Karen Bowling Executive Director

Nebraska Family Alliance

Carroll Conley Executive Director

Christian Civic League Maine

Len Deo

Founder & President

New Jersey Family Policy Council

Allen Whitt President

Family Policy Council & Family Policy

Institute (WV)

Shannon McGinley Executive Director Cornerstone Action (NH)

Gene Mills President

Louisiana Family Forum

Eva Andrade President

Hawaii Family Forum

Cathi Herrod President

Center for Arizona Policy

Ed Randazzo

Director of Political Operations Family Heritage Alliance Action

Julie Lynde

Executive Director

Cornerstone Family Council (Idaho

Jeff Laszloffy President

Montana Family Foundation

Joseph Backholm

President

Family Policy Institute of Washington

David E. Smith Executive Director Illinois Family Institute

John Helmberger

CEO

Minnesota Family Council

Aaron Baer President

Citizens for Community Values

Andrew Beckwith

President

Massachusetts Family Institute

Thomas J. Shaheen Vice President for Policy Pennsylvania Family Council From: Autumn Christensen

 Sent:
 5 Dec 2017 22:41:57 +0000

 To:
 Stannard, Paula (HHS/IOS)

Cc: Autumn Christensen

Subject: RE: letter regarding Obamacare abortion transparency

Attachments: Letter to OIG - Abortion Coverage Transparency in Health Insurance.pdf, Letter

to Acting Secretary HHS - Abortion Coverage Transparency in Health Insurance.pdf

There was a typo in the letter emailed earlier today. In one place it incorrectly referred to the CMS bulletin as being issued on the 16^{th} not the 6^{th} . The attached letters updated with the correct date. Apologies,

From: Autumn Christensen

Sent: Tuesday, December 05, 2017 4:58 PM

To: 'paula.stannard@hhs.gov' <paula.stannard@hhs.gov>
Cc: Autumn Christensen <achristensen@sba-list.org>
Subject: letter regarding Obamacare abortion transparency

Hi Paula,

Autumn

Attached is a letter to the Acting Secretary and an accompanying letter to the OIG. Could you make sure he sees it? We have sent it via FedEx, but want him to have it as soon as possible, since we also intend to release it to the press.

We are extremely grateful for your attention to this issue. As you will see we have identified eight insurance issuers who are out of compliance with abortion transparency requirements. These carriers offer over 150 plans in five states. We are asking the OIG to investigate the eight issuers and HHS to take action to bring these issuers into compliance.

Thank you very much, Autumn

Autumn Christensen

Policy Director Susan B. Anthony List

December 5, 2017

The Honorable Daniel R. Levinson Inspector General, Office of Inspector General U.S. Department of Health and Human Services PO Box 23489 Washington, D.C. 20026

Via Fax: 1-800-223-8164

RE: Non-Compliance of Insurance Carriers offering QHPs on Exchanges in 2018 Concerning Abortion Coverage Disclosure

Dear Inspector General Levinson:

In this fourth year of open enrollment for the Patient Protection and Affordable Care Act (ACA) health insurance exchanges, Americans in several states continue to face great difficulties in determining whether certain exchange plans cover abortion. Violating the legal requirements established more than two years ago, insurance carriers are failing to include this information in their Summary of Benefits and Coverage (SBC) documents. As mandated in the Department of Health and Human Services (HHS) June 2015 final rule¹, which implements and provides additional guidance on Section 1303(b)(3)(A) of the ACA², carriers that offer Qualified Health Plans on the exchanges are required to state directly on the plans' SBCs whether and to what extent abortion is covered as a health benefit. This required disclosure was also recently underscored in an October 6, 2017 Centers for Medicare and Medicaid Services (CMS) Bulletin addressing Section 1303 regulations.³ For the current enrollment period, we have identified clear violations of this abortion coverage notice regulation. In particular, as of this writing, we have

[&]quot;These final regulations require that QHP issuers must disclose on the SBC for QHPs sold through an individual market Exchange whether abortion services are covered or excluded, and whether coverage is limited to excepted abortion services. [...] [T]his requirement is applicable for individual market QHP issuers for SBCs issued in connection with coverage that begins on or after January 1, 2016." Though this final rule allowed for carriers to meet the abortion notice requirement in various ways *until* the updated SBC template and instructional documents were finalized, those documents have since been published and are applicable for the current enrollment year. See "QHP and Abortion Services" at p. 34297, available at https://www.gpo.gov/fdsys/pkg/FR-2015-06-16/pdf/2015-14559.pdf. See also the current, applicable "Summary of Benefits and Coverage Instruction Guide for Individual Health Insurance Coverage" (April 2017) at p. 14-15, available at https://www.cms.gov/CCIIO/Resources/Forms-Reports-and-Other-Resources/Downloads/Individual-Instructions-508-MM.pdf "FOR QUALIFIED HEALTH PLANS: Plans that cover excepted and non-excepted abortion services must list 'abortion' in the covered services box. Plans that cover only excepted abortions should list in the excluded services box 'abortion (except in cases of rape, incest, or when the life of the mother is endangered)' and may also include a cross-reference to another plan document that more fully describes the exceptions."

² 45 C.F.R. § 156.280(f)(1).

³ See https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/Section-1303-Bulletin-10-6-2017-FINAL-508.pdf

Inspector General Levinson December 5, 2017 Page 2 of 12

found eight carriers, offering Individual and Family Qualified Health Plans in five states, that do not disclose any abortion coverage information in their SBCs provided on the exchanges.⁴

These carriers are:

- (1) Bright Health in Colorado's state-based marketplace 6 plans;
- (2) Elevate by Denver Health Medical in Colorado's state-based marketplace 6 plans;
- (3) Health Alliance Medical Plans, Inc. in Illinois' state-federal partnership 61 plans;
- (4) Boston Medical Center HealthNet Plan in Massachusetts' state-based marketplace 5 plans;
- (5) Fidelis Care in New York's state-based marketplace 9 plans;
- (6) Independent Health in New York's state-based marketplace 21 plans;
- (7) MVP Health Plan in New York's state-based marketplace 39 plans; and
- (8) Sendero Health Plans, Inc. in Texas' federally-facilitated marketplace 4 plans

Based on these plans that we accessed from the exchanges, the lack of transparency on abortion coverage in these carriers' SBCs affects a total of at least 151 Individual and Family exchange plans in five states. Please see the appendix attached at the conclusion containing relevant screenshots of these carriers' SBCs.

Since the first open enrollment in October 2013 until today, the Charlotte Lozier Institute and Family Research Council have researched ACA exchange plans to discern which ones cover or exclude non-excepted abortions, and have made those findings accessible online to the general public. Throughout the course of conducting this annual research project, we have encountered numerous and varied difficulties in obtaining definitive abortion coverage information for ACA plans – difficulties that have included plan documents not containing any abortion coverage notice and carriers' customer service representatives not being aware of or offering conflicting information on their plans' abortion coverage status. Furthermore, as you are aware, in

⁴ Charlotte Lozier Institute and Family Research Council looked at Individual and Family health exchange plans offered in the 25 states and the District of Columbia that legally permit elective abortion coverage in exchange plans as of November 30, 2017. These jurisdictions are: Alaska, California, Colorado, Connecticut, Delaware, District of Columbia, Hawaii, Illinois, Iowa, Maine, Maryland, Massachusetts, Minnesota, Montana, Nevada, New Hampshire, New Jersey, New Mexico, New York, Oregon, Rhode Island, *Texas**, Vermont, Washington, West Virginia, and Wyoming. *Texas passed a law prohibiting abortion in exchange plans, with an effective date of December 1, 2017. ⁵Abortion coverage plan information has been updated annually since November 2014 at www.obamacareabortion.com, a project conducted in conjunction with Family Research Council.

⁶ The following sample of articles below describes these difficulties on abortion coverage transparency in ACA exchange plans. https://lozierinstitute.org/elective-abortion-coverage-information-still-elusive/ (last visited December 4, 2017); http://www.nationalreview.com/article/384618/total-confusion-elective-abortion-coverage-genevieve-c-plaster (last visited December 4, 2017); https://townhall.com/columnists/chuckdonovan/2015/02/02/abortion-and-the-obamacare-exchanges-still-not-what-the-doctor-ordered-n1951762 (last visited December 4, 2017);

https://lozierinstitute.org/obamacare-year-3-abortion-coverage-still-hidden/ (last visited December 4, 2017); See also "Abortion Coverage Under the Affordable Care Act: The Laws Tell Only Half the Story," Guttmacher Policy Review, Winter 2014, Vol. 17, available at http://www.guttmacher.org/pubs/gpr/17/1/gpr170115.html#table (last visited December 4, 2017). ("[T]he information consumers can find may not tell the whole story about what issuers are, or are not, covering. Rather, because the vast majority of plan documents searched are silent with regard to abortion coverage, or occasionally provide confusing or contradictory information, it is often difficult to know

Inspector General Levinson December 5, 2017 Page **3** of **12**

September 2014, the Government Accountability Office (GAO) published a report from its investigation on the scope and transparency of abortion coverage in federally subsidized ACA exchange plans.⁷ Among its findings is that 11 of the 18 plan issuers GAO interviewed as a sample did not disclose abortion coverage information to consumers before they enrolled. Furthermore, four of the 11 issuers indicated they were not providing notification of abortion coverage to enrollees even at the time of enrollment.

There has, however, been some long-overdue progress with abortion coverage transparency in exchange plans, even in comparison to one year ago. For perspective, during last year's open enrollment season, we discovered that 23 carriers offering Individual and Family plans in 13 exchanges did not provide abortion coverage information in their SBCs – compared to this year's 8 carriers offering plans in 5 exchanges.

As already mentioned, the October 6, 2017 CMS bulletin further stresses the need for carrier compliance with the abortion coverage disclosure regulation, among other things. Specifically, it reads, "Here, CMS reminds QHP issuers of their obligation to comply with section 1303. Issuers must be able to demonstrate compliance with the following: [...] Issuers must provide an annual notice in the Summary of Benefits and Coverage that describes whether non-Hyde abortion services are covered by the QHP. [...] Failure to comply with these requirements could result in civil monetary penalties beginning in the 2018 plan year."

In closing, we found that eight health insurance carriers offering QHPs in five exchanges do not provide any disclosure on the abortion coverage in their SBCs, as required by the June 2015 HHS final rule, implementing and providing guidance on Section 1303 (b)(3)(A) of the ACA. Based on this, and in the interest of Americans seeking to purchase a health plan on these exchanges by the federal December 15th close of the enrollment season, we urge the Office of the Inspector General to immediately conduct a review of these carriers and, where applicable, to works with HHS to swiftly take steps to ensure carriers provide a clear abortion coverage notice on all SBCs by a certain date, or else risk a monetary penalty, as CMS has cautioned. We have written to HHS, requesting that all current enrollees in these affected QHPs be informed of any changes to their plan documents on abortion coverage, and have requested that individuals seeking exchange plans in Colorado, Illinois, Massachusetts, New York, and Texas be provided with an extended period of enrollment to allow for a review of any updated plan documents.

The current lack of abortion coverage information in the SBCs from these eight carriers mentioned above is more than just an issue of legality; it is an issue of transparency. We hope that with the increased emphasis on compliance with the abortion coverage disclosure regulation in Section 1303, and with your Office's review, these carriers will be spurred to publish timely

whether and to what extent abortion might be excluded. Notably, in eight of the states investigated, Guttmacher did not find a single issuer providing any information on abortion coverage in their plans' SBCs.").

⁷ See "Health Insurance Exchanges: Coverage of Non-excepted Abortion Services by Qualified Health Plans" (Sept. 2014) available at https://www.gao.gov/products/GAO-14-742R.

⁸ https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/Section-1303-Bulletin-10-6-2017-FINAL-508.pdf

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corrections for the benefit of the millions of Americans living in states where their 151 plans are offered. Though Americans surely have differing views on abortion, ensuring transparency of covered benefits for any given health plan prior to purchasing is a worthy, common-sense, common-ground objective that allows individuals and families to make free and fully informed choices for care.

Sincerely,

Marjorie J. Dannenfelser

President

Susan B. Anthony List

Charles A. "Chuck" Donovan

President

Charlotte Lozier Institute

Attachment

If you have outpatient

Chiropractic Care

surgery

Facility fee (e.g., ambulatory

Physician/surgeon fees

surgery center)

Office visits

Appendix

 Bright Health 2018 plans in Colorado. Screenshots of randomly selected sample plan SBC, Bronze HSA, with no abortion coverage disclosure as of 11/20/17. (No direct SBC link is available to copy from the exchange, but this plan's SBC document title is "SBC_Benefits_31070CO0010007011512407792452.pdf" on http://planfinder.connectforhealthco.com/.)

Not Covered

Not Covered

Not Covered

Services require pre-authorization.

Services require pre-authorization.

None

If you are pregnant	Childbirth/delivery professional services	0% coinsurance	Not Covered		Delivery stays exceeding 48 hours for vaginal
	Childbirth/delivery facility services	ty 0% coinsurance Not Covered			deliver or 96 hours for a cesarean delivery require pre-authorization.
	Other Covered Services:				
 Services Your <u>Plan</u> Ge Acupuncture 	nerally Does NOT Cover (Check y	our policy or plan doo Long Term Care	cument for more information	on a	nd a list of any other excluded services.) Routine eye care (Adults)
Cosmetic Surgery Dental Care (Adults)			hen traveling outside the	•	Routine foot care Weight loss programs
Other Covered Service	es (Limitations may apply to these	services. This isn't a	complete list. Please see	your	r plan document.)
Bariatric Surgery	•	Hearing Aids			Private-duty nursing

0% coinsurance

0% coinsurance

0% coinsurance

Infertility Treatment

 Elevate by Denver Health Medical in Colorado. Screenshots of randomly selected sample plan SBC, Bronze HDHP, with no abortion coverage disclosure as of 11/20/17 (No direct SBC link is available to copy from the exchange, but this plan's SBC document title is "SBC_Benefits_66699CO0030008011512408078843.pdf" on http://planfinder.connectforhealthco.com/.)

If you have outpatient surgery	Facility fee (e.g., ambulatory surgery center)	50% coinsurance	100% coinsurance	Pre-authorization required.
W	Prenatal and postnatal care	50% coinsurance	100% coinsurance	none
If you are pregnant	Delivery and all inpatient services	50% coinsurance	100% coinsurance	Pre-authorization required.

Excluded Services & Other Covered Services:

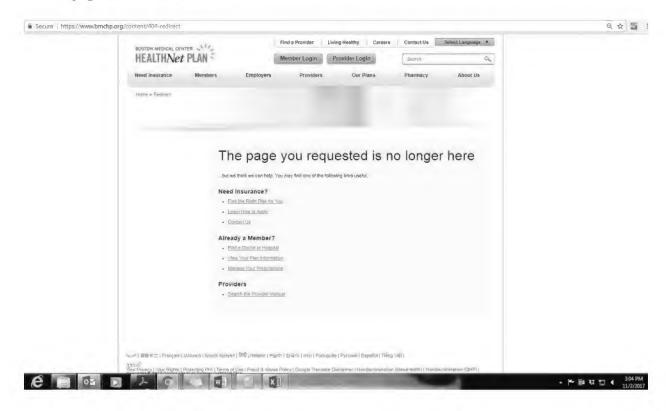
Services Your Plan Generally Does I	IOT Cover (Check your p	olicy or plan document for more informati	ion a	and a list of any other excluded services.)
Acupuncture	Long-	term care		Routine foot care
Cosmetic surgery	Non-e	emergency care when traveling outside the	•	Weight loss programs
 Dental care (Adult) 	U.S.			

Other Covered Services (Limitation	s may apply to these services. This isn't a complete li	st. Please see your plan document.)
Bariatric surgery	 Hearing aids 	 Private-duty nursing (when medically necessary)
Chiropractic care	 Infertility treatment 	Routine eye care

 Health Alliance Medical Plans, Inc. in Illinois. Screenshots of randomly selected sample plan SBC, HMO 2000 Elite Gold, with no abortion coverage disclosure as of 11/20/17: https://www.healthalliance.org/docs/2018_IL_IND_PUB_SBC_HMO_2000_ELITE_GO_LD.pdf

If you have outpatient surgery	Facility fee (e.g., ambulatory surgery center)	10% coinsurance	Not Covered	Preauthorization may be required for certain procedures. Contact customer Service for detailed information.
	Physician/surgeon fees	10% coinsurance	Not Covered	none
	Office visits	10% coinsurance for routine prenatal care	Not Covered	none
If you are pregnant	Childbirth/delivery professional services	\$200 co-pay / stay	Not Covered	none
	Childbirth/delivery facility services	\$200 co-pay / stay	Not Covered	none
			nent for more information	on and a list of any other excluded services.) Non-Emergency Care When Traveling Outside
Acupuncture Cosmetic Surgery(lim	ited)	Dental Care (Adult) Long-Term Care		the U.S. • Weight Loss Programs
Other Covered Services	(Limitations may apply to these	services. This isn't a co	mplete list. Please see	your <u>plan</u> document.)
Bariatric Surgery Chiropractic Care		Infertility Services Private-Duty Nursing		Routine eye Care(Adult) Routine foot care

4. **A) Boston Medical Center HealthNet Plan** (5 plans in Massachusetts). Initial re-direct page (as of 11/2/2017):



older

· Chiropractic Care

Hearing Aids for members over age 21

B) Screenshot of Boston Medical Center HealthNet 2018, randomly selected sample plan SBC, ConnectorCare Plan Type 1, with no abortion coverage disclosure as of 11/20/2017:

https://www.bmchp.org/-/media/2e5e808922e64f34aba00e6f9e426639.ashx

Diabetes

Hearing Aids for Children

No charge for pre-natal

Childbirth/delivery professional services No Charge Not Covered Office visits for medical conditions of subject to cost-sharing. Not Covered Not	nay be
Childbirth/delivery facility Not Govered	
English for to a probulation	and a
If you have outpatient Surgery center) Facility fee (e.g., ambulatory surgery center) No Charge Not Covered - Includes diagnostic colonoscopies endoscopies.	and
Surgery Physician/surgeon fees - Preauthorization may be required.	
ED 0 1: 1971 34	2 4. 11

Long-term care
 Dental Care (Adult)
 Evidence of Coverage.
 Other Covered Services (Limitations may apply to these services. This isn't a complete list. Please see your plan document.)
 Bariatric Surgery
 Dental Services for Cleft Lip/Palate Repair
 Infertility treatment

Routine foot care except for members with

Evidence of Coverage.

Weight loss programs, except as described in the

 Fidelis Care plans in New York. Screenshots of randomly selected sample plan SBC, Fidelis Care Silver, with no abortion coverage disclosure as of 11/21/2017: https://www.fideliscare.org/Portals/0/DocumentLibrary/Products/NY%20State%20of%2 0Health/2018%20Products/SBCSilver2018.pdf

If you have	Facility fee (e.g., ambulatory surgery center)	\$100 copay after deductible	Not covered	Prior authorization is required.
outpatient surgery	Physician/surgeon fees	\$100 copay after	Not covered	Prior authorization required. One copay

^{*} For more information about limitations and exceptions, see the plan or policy document at www.fideliscare.org.

2 of 7

	Office visits	\$30 copay per visit after deductible	Not covered	None.
If you are pregnant	Childbirth/delivery professional services	\$100 copay per visit after deductible	Not covered	Prior authorization is required.
	Childbirth/delivery facility services	\$1,500 copay per admission after deductible	Not covered	Prior authorization is required.

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			_
Excluded	Services I	Other Covered	Services:

Services Your Plan Generally Does NOT Cover (Check your policy or plan document for more infor	mation and a list of any other excluded
services.)	

Cosmetic surgery

Private duty nursing

Long-term care

Routine foot care

- Routine dental care (adult)
- Routine eye care (adult)

Other Covered Services (Limitations may apply to these services. This isn't a complete list. Please see your plan document.)

- Chiropractic care
- · Fitness center reimbursement

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Your Rights to Continue Coverage: There are agencies that can help if you want to continue your coverage after it ends. The contact information for those agencies is:

6. Independent Health plans in New York. Screenshots of randomly selected sample plan SBC, Standard Silver ST OON Dep29, with no abortion coverage disclosure as of 11/21/2017:

 $\underline{\text{https://www.independenthealth.com/Portals/0/PDFs/Exchange/2018/Standard_Silver_18}\\029NY1260002-01.pdf}$

If you have	Facility fee (e.g., ambulatory surgery center)	\$100 copay/visit	40% coinsurance	Authorization may be required
outpatient surgery	Physician/surgeon fees	\$100 copay/visit	40% coinsurance	Authorization may be required
	-	anno / 1 1	marco era	25 5 4 5 5 5 6

		1 2 3*	1	1
If you are pregnant	Prenatal and postnatal care	No charge	40% coinsurance	No charge after the initial diagnosis

Questions: Call 1-800-501-3439 or visit us at www.independenthealth.com.

If you aren't clear about any of the bolded terms used in this form, see the Glossary. You can view the Glossary at www.independenthealth.com or call 1-800-501-3439 to request a copy.

18029NY1260002-01

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independent Health. Standard Silver
Summary of Benefits and Coverage: What this Plan Covers & What it Costs

Coverage beginning on or after: 01/01/17 Coverage for: All Tier Levels Plan Type: POS

Deliver services	Physi	00	40% coinsurance	Semí-private room, per admission
				** 40 44

^{*} For more information about limitations and exceptions, see the plan or policy document at www.fideliscare.org.

Bariatric surgery

· Chiropractic care

Excluded Services & Other Covered Services:

Acupuncture	 Long-term care 	Routine eye care (Adult)
Cosmetic Surgery	 Non-emergency care when traveling outside the U.S. 	Routine foot care
Dental care (Adult)	Private duty nursing	 Weight loss programs

Hearing aidsInfertility treatment

7. MVP plans in New York. Screenshots of randomly selected sample plan SBC, "NY MVP Premier Plus HDHP Silver 3, 94" with no abortion coverage disclosure as of 11/21/2017: http://mvpsbc.arvatocim.com/SBCPDFs/FRNY-HMOH-DS1-003-N-94%20(2018)-422015.pdf

If you have	Facility fee (e.g., ambulatory surgery center)	\$50 copay/day	Not covered	Deductible applies	
outpatient surgery	Physician/surgeon fees	\$40 copay/procedure	Not covered	Deductible applies	
		PPD warmer & duck	een aaaaa dada	Padvathia section assessment if admitted	
If you are pregnant	Office visits	No charge	Not covered	Cost sharing does not apply to certain preventive services. Depending on the type services, a copay, coinsurance, and/or	
	Childbirth/delivery professional services	\$40 copay/delivery	Not covered	deductible may apply. Maternity care may include tests and services described	
	Childbirth/delivery facility services	\$100 copay/stay	Not covered	elsewhere in the SBC (i.e. ultrasound).	

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Children's Dental Check-up	
Cosmetic Surgery	
Dental Care (Adult)	
Long-Term Care	
Non-Emergency care when traveling outside the U.S	
Private-Duty Nursing	
Routine Eye Care (Adult)	
Routine Foot Care	

Other Covered Services (Limitations may apply to these services. This isn't a complete list. Please see your plan document.)	
Acupuncture	
Bariatric Surgery	
Chiropractic Care	
Hearing Aids	
Infertility Treatment	
Weight Loss Programs	

E 0/ 9

8. Sendero 2018 Plans in Texas. Screenshots of randomly selected sample plan SBC, Total Standard (Gold), with no abortion coverage disclosure as of 11/21/17: http://senderohealth.com/files/2018/71837TX001000201_Total_Std.pdf

If you have outpatient surgery	Facility fee (e.g., ambulatory surgery center)	\$150 <u>copay/per surgery</u>	Not covered	Certain services may require preauthorization. If preauthorization is not obtained you may be responsible for
* For more information at	bout limitations and exceptions, s	ee the plan or policy documen	it at www.senderohealth	n.com. 2 of 10

If you are pregnant	Office visits	\$10 copay/office visit Deductible does not apply.	Not covered	Copay per initial visit and delivery. No charge for subsequent prenatal visits with the same
	Childbirth/delivery professional services	No charge	Not covered	<u>provider</u> or <u>provider</u> group per pregnancy. Depending on the type of services,
ii you are pregnant	Childbirth/delivery facility services	20% coinsurance/per delivery	Not covered	<u>coinsurance</u> or <u>copay</u> may apply. Maternity care does not include tests and services described elsewhere in the SBC (i.e. ultrasound).

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Excluded Services & Other Covered Services:

Services Your Plan Generally Does NOT Cover (Check your policy or plan document for more information and a list of any other excluded services.) Non-emergency care when traveling outside Acupuncture Dental care (Adult) the U.S. Bariatric surgery Long-term care Private-duty nursing Cosmetic surgery Weight loss programs Other Covered Services (Limitations may apply to these services. This isn't a complete list. Please see your plan document.)

- Chiropractic care is combined with rehabilitation (PT, OT, ST, and Chiropractic Services)
- Hearing aids are limited to 1 per ear every 3 years.
- Infertility treatment is limited to diagnostic services only. Treatment to correct the infertility condition and services such as in vitro fertilization and artificial insemination are excluded from coverage.
- Routine eye care (Adult) is limited to 1 eye exam per calendar year.
- Routine foot care is limited to foot care in connection with diabetes, circulatory disorders of the lower extremities, peripheral vascular disease, peripheral neuropathy, or chronic arterial or venous insufficiency.

Example of a Company That Updated SBCs Previously Silent on Abortion Coverage:

1. A. ConnectiCare Benefits plans in Connecticut (7 of 8 plan SBCs did not have abortion coverage information, initially, as of 11/3/2017). Screenshots of randomly selected Passage Silver Alternative PCP POS:

CBI POS76962CT0010022 01SBC

If you have outpatient surgery	Facility fee (e.g., ambulatory surgery center)	\$500 <u>copayment</u> /visit_after INET plan <u>deductible</u> is met	50% <u>coinsurance</u> after OON plan <u>deductible</u> is met	Preauthorization is required. If you don't get preauthorization, you may be responsible for the total cost of the service or benefits may be reduced by the lesser of \$500 or 50%.
	Physician/surgeon fees	0% <u>coinsurance</u> after INET plan <u>deductible</u> is met	50% coinsurance after OON plan deductible is met	None
	Office visits	No charge for prenatal and postnatal care	50% <u>coinsurance</u> after OON plan <u>deductible</u> is met	Cost sharing does not apply to certain
If you are pregnant	Childbirth/delivery professional services	0% <u>coinsurance</u> after INET plan <u>deductible</u> is met	50% <u>coinsurance</u> after OON plan <u>deductible</u> is met	preventive services. Depending on the type of services, coinsurance may apply. Maternity care may include tests and
	Childbirth/delivery facility services	\$500 <u>copayment</u> /day up to a maximum of \$2,000 per admission after INET plan <u>deductible</u> is met	50% <u>coinsurance</u> after OON plan <u>deductible</u> is met	services described elsewhere in the SBC (i.e. ultrasound).

Services Your Plan Generally Does NOT Cove Acupuncture Bariatric surgery Cosmetic surgery Dental Care - Adult	Check your policy or <u>plan</u> document for more inform Long Term Care Non-emergency care when traveling outside the U.S. Private-duty nursing	Routine foot care
Other Covered Services (Limitations may appl	y to these services. This isn't a complete list. Please s	ee your <u>plan</u> document.)
Chiropractic Care Hearing aids (may be covered with limitations)	Infertility treatment	Routine eye care

B. Updated - Same 2018 ConnectiCare Benefits plan in Connecticut, Passage Silver Alternative PCP POS, as of 11/21/17 (Updated SBCs do have abortion information): https://www.connecticare.com/globalfiles/sbc/2018/en-us/PassageSilverAltPOSSBC.pdf

CBI_POS76962CT0010022_01SBC

Excluded Services & Other Covered Services:

management

Chiropractic Care

Bariatric surgery Cosmetic surgery Dental Care - Adult	 Long Term Care Non-emergency care when traveling outside the U.S. Private-duty nursing 	Routine foot care Routine hearing tests Weight loss programs
other Covered Services (Limitations may app Acupuncture coverage is limited to pain	ly to these services. This isn't a complete list. Please see	your <u>plan</u> document.)

· Termination of pregnancy/abortion

Infertility treatment

The Honorable Eric D. Hargan
Acting Secretary and Deputy Secretary
U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, D.C. 20201

RE: Non-Compliance of Insurance Carriers offering QHPs on Exchanges in 2018 Concerning Abortion Coverage Disclosure

Dear Acting Secretary Hargan:

In this fourth year of open enrollment for the Patient Protection and Affordable Care Act (ACA) health insurance exchanges, Americans in several states continue to face great difficulties in determining whether certain exchange plans cover abortion. Violating the legal requirements established more than two years ago, insurance carriers are failing to include this information in their Summary of Benefits and Coverage (SBC) documents. As mandated in the Department of Health and Human Services (HHS) June 2015 final rule¹, which implements and provides additional guidance on Section 1303(b)(3)(A) of the ACA², carriers that offer Qualified Health Plans on the exchanges are required to state directly on the plans' SBCs whether and to what extent abortion is covered as a health benefit. This required disclosure was also recently underscored in an October 6, 2017 Centers for Medicare and Medicaid Services (CMS) Bulletin addressing Section 1303 regulations.³ For the current enrollment period, we have identified clear violations of this abortion coverage notice regulation. In particular, as of this writing, we have

[&]quot;These final regulations require that QHP issuers must disclose on the SBC for QHPs sold through an individual market Exchange whether abortion services are covered or excluded, and whether coverage is limited to excepted abortion services. [...] [T]his requirement is applicable for individual market QHP issuers for SBCs issued in connection with coverage that begins on or after January 1, 2016." Though this final rule allowed for carriers to meet the abortion notice requirement in various ways *until* the updated SBC template and instructional documents were finalized, those documents have since been published and are applicable for the current enrollment year. See "QHP and Abortion Services" at p. 34297, available at https://www.gpo.gov/fdsys/pkg/FR-2015-06-16/pdf/2015-14559.pdf. See also the current, applicable "Summary of Benefits and Coverage Instruction Guide for Individual Health Insurance Coverage" (April 2017) at p. 14-15, available at https://www.cms.gov/CCIIO/Resources/Forms-Reports-and-Other-Resources/Downloads/Individual-Instructions-508-MM.pdf "FOR QUALIFIED HEALTH PLANS: Plans that cover excepted and non-excepted abortion services must list 'abortion' in the covered services box. Plans that cover only excepted abortions should list in the excluded services box 'abortion (except in cases of rape, incest, or when the life of the mother is endangered)' and may also include a cross-reference to another plan document that more fully describes the exceptions."

² 45 C.F.R. § 156.280(f)(1).

³ See https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/Section-1303-Bulletin-10-6-2017-FINAL-508.pdf

Acting Secretary Hargan December 5, 2017 Page 2 of 12

found eight carriers, offering Individual and Family Qualified Health Plans in five states, that do not disclose any abortion coverage information in their SBCs provided on the exchanges.⁴

These carriers are:

- (1) Bright Health in Colorado's state-based marketplace 6 plans;
- (2) Elevate by Denver Health Medical in Colorado's state-based marketplace 6 plans;
- (3) Health Alliance Medical Plans, Inc. in Illinois' state-federal partnership 61 plans;
- (4) Boston Medical Center HealthNet Plan in Massachusetts' state-based marketplace 5 plans;
- (5) Fidelis Care in New York's state-based marketplace 9 plans;
- (6) Independent Health in New York's state-based marketplace 21 plans;
- (7) MVP Health Plan in New York's state-based marketplace 39 plans; and
- (8) Sendero Health Plans, Inc. in Texas' federally-facilitated marketplace 4 plans

Based on these plans that we accessed from the exchanges, the lack of transparency on abortion coverage in these carriers' SBCs affects a total of at least 151 Individual and Family exchange plans in five states. Please see the appendix attached at the conclusion containing relevant screenshots of these carriers' SBCs.

Since the first open enrollment in October 2013 until today, the Charlotte Lozier Institute and Family Research Council have researched ACA exchange plans to discern which ones cover or exclude non-excepted abortions, and have made those findings accessible online to the general public. Throughout the course of conducting this annual research project, we have encountered numerous and varied difficulties in obtaining definitive abortion coverage information for ACA plans – difficulties that have included plan documents not containing any abortion coverage notice and carriers' customer service representatives not being aware of or offering conflicting information on their plans' abortion coverage status. Furthermore, as you are aware, in

⁴ Charlotte Lozier Institute and Family Research Council looked at Individual and Family health exchange plans offered in the 25 states and the District of Columbia that legally permit elective abortion coverage in exchange plans as of November 30, 2017. These jurisdictions are: Alaska, California, Colorado, Connecticut, Delaware, District of Columbia, Hawaii, Illinois, Iowa, Maine, Maryland, Massachusetts, Minnesota, Montana, Nevada, New Hampshire, New Jersey, New Mexico, New York, Oregon, Rhode Island, *Texas**, Vermont, Washington, West Virginia, and Wyoming. *Texas passed a law prohibiting abortion in exchange plans, with an effective date of December 1, 2017. ⁵Abortion coverage plan information has been updated annually since November 2014 at www.obamacareabortion.com, a project conducted in conjunction with Family Research Council.

⁶ The following sample of articles below describes these difficulties on abortion coverage transparency in ACA exchange plans. https://lozierinstitute.org/elective-abortion-coverage-information-still-elusive/ (last visited December 4, 2017); https://www.nationalreview.com/article/384618/total-confusion-elective-abortion-coverage-genevieve-c-plaster (last visited December 4, 2017); https://townhall.com/columnists/chuckdonovan/2015/02/02/abortion-and-the-obamacare-exchanges-still-not-what-the-doctor-ordered-n1951762 (last visited December 4, 2017);

https://lozierinstitute.org/obamacare-year-3-abortion-coverage-still-hidden/ (last visited December 4, 2017); See also "Abortion Coverage Under the Affordable Care Act: The Laws Tell Only Half the Story," Guttmacher Policy Review, Winter 2014, Vol. 17, available at http://www.guttmacher.org/pubs/gpr/17/1/gpr170115.html#table (last visited December 4, 2017). ("[T]he information consumers can find may not tell the whole story about what issuers are, or are not, covering. Rather, because the vast majority of plan documents searched are silent with regard to abortion coverage, or occasionally provide confusing or contradictory information, it is often difficult to know

Acting Secretary Hargan December 5, 2017 Page **3** of **12**

September 2014, the Government Accountability Office (GAO) published a report from its investigation on the scope and transparency of abortion coverage in federally subsidized ACA exchange plans.⁷ Among its findings is that 11 of the 18 plan issuers GAO interviewed as a sample did not disclose abortion coverage information to consumers before they enrolled. Furthermore, four of the 11 issuers indicated they were not providing notification of abortion coverage to enrollees even at the time of enrollment.

There has, however, been some long-overdue progress with abortion coverage transparency in exchange plans, even in comparison to one year ago. For perspective, during last year's open enrollment season, we discovered that 23 carriers offering Individual and Family plans in 13 exchanges did not provide abortion coverage information in their SBCs – compared to this year's 8 carriers offering plans in 5 exchanges.

As already mentioned, the October 16, 2017 CMS bulletin further stresses the need for carrier compliance with the abortion coverage disclosure regulation, among other things. Specifically, it reads, "Here, CMS reminds QHP issuers of their obligation to comply with section 1303. Issuers must be able to demonstrate compliance with the following: [...] Issuers must provide an annual notice in the Summary of Benefits and Coverage that describes whether non-Hyde abortion services are covered by the QHP. [...] Failure to comply with these requirements could result in civil monetary penalties beginning in the 2018 plan year."

In closing, we found that eight health insurance carriers offering QHPs in five exchanges do not provide any disclosure on the abortion coverage in their SBCs, as required by the June 2015 HHS final rule, implementing and providing guidance on Section 1303 (b)(3)(A) of the ACA. Based on this, and in the interest of Americans seeking to purchase a health plan on these exchanges by the federal December 15th close of the enrollment season, we have written to the Office of the Inspector General, urging the Office to conduct an immediate review of these carriers to confirm non-compliance. We also urge the Department of Health and Human Services to swiftly take steps to ensure carriers provide a clear abortion coverage notice on all SBCs by a certain date, or else risk a monetary penalty, as CMS has cautioned. Secondly, we request that all current enrollees in these QHPs be informed of changes to their plan documents on abortion coverage. Lastly, with the federal deadline to purchase a health plan looming in the next two weeks, we also request that individuals seeking exchange plans in Colorado, Illinois, Massachusetts, New York, and Texas be provided with an extended period of enrollment to allow for a review of any updated plan documents.

The current lack of abortion coverage information in the SBCs from these eight carriers mentioned above is more than just an issue of legality; it is an issue of transparency. We hope

whether and to what extent abortion might be excluded. Notably, in eight of the states investigated, Guttmacher did not find a single issuer providing any information on abortion coverage in their plans' SBCs.").

⁷ See "Health Insurance Exchanges: Coverage of Non-excepted Abortion Services by Qualified Health Plans" (Sept. 2014) available at https://www.gao.gov/products/GAO-14-742R.

⁸ https://www.cms.gov/CCIIO/Resources/Regulations-and-Guidance/Downloads/Section-1303-Bulletin-10-6-2017-FINAL-508.pdf

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that with the increased emphasis on compliance with the abortion coverage disclosure regulation in Section 1303, and with your Office's review, these carriers will be spurred to publish timely corrections for the benefit of the millions of Americans living in states where their 151 plans are offered. Though Americans surely have differing views on abortion, ensuring transparency of covered benefits for any given health plan prior to purchasing is a worthy, common-sense, common-ground objective that allows individuals and families to make free and fully informed choices for care.

Sincerely,

Marjorie J. Dannenfelser

Marque Lanuagelser

President

Susan B. Anthony List

Charles A. "Chuck" Donovan

President

Charlotte Lozier Institute

Attachment

cc: Ms. Seema Verma

Administrator

Centers for Medicare and Medicaid Services

Mr. Randy Pate

Deputy Administrator and Director

CMS Center for Consumer Information and Insurance Oversight

If you have outpatient

Chiropractic Care

surgery

Facility fee (e.g., ambulatory

Physician/surgeon fees

surgery center)

Office visits

Appendix

1. Bright Health 2018 plans in Colorado. Screenshots of randomly selected sample plan SBC, Bronze HSA, with no abortion coverage disclosure as of 11/20/17. (No direct SBC link is available to copy from the exchange, but this plan's SBC document title is "SBC_Benefits_31070CO0010007011512407792452.pdf" on http://planfinder.connectforhealthco.com/.)

Not Covered

Not Covered

Not Covered

Services require pre-authorization.

Services require pre-authorization.

None

If you are pregnant	Childbirth/delivery professional services	0% coinsurance Not Covered			Delivery stays exceeding 48 hours for vaginal	
	Childbirth/delivery facility services			deliver or 96 hours for a cesarean delivery require pre-authorization.		
	Other Covered Services:					
 Acupuncture 	nerally Does NOT Cover (Check y	Long Term Care	ument for more information		d a list of any other excluded services.) Routine eye care (Adults)	
Cosmetic Surgery		Non-emergency care when traveling outside the			Routine foot care	
 Dental Care (Adults)	U.S.		•	Weight loss programs	
Other Covered Service	s (Limitations may apply to these	services. This isn't a	complete list. Please see y	our	olan document.)	
 Bariatric Surgery 	•	Hearing Aids			Private-duty nursing	
Chicagonialia Casa		Lafantiit. Taxataxaat			Frivate-duty nursing	

0% coinsurance

0% coinsurance

0% coinsurance

Infertility Treatment

 Elevate by Denver Health Medical in Colorado. Screenshots of randomly selected sample plan SBC, Bronze HDHP, with no abortion coverage disclosure as of 11/20/17 (No direct SBC link is available to copy from the exchange, but this plan's SBC document title is "SBC_Benefits_66699CO0030008011512408078843.pdf" on http://planfinder.connectforhealthco.com/.)

If you have outpatient surgery	Facility fee (e.g., ambulatory surgery center)	50% coinsurance	100% coinsurance	Pre-authorization required.
g	Prenatal and postnatal care	50% coinsurance	100% coinsurance	none
If you are pregnant	Delivery and all inpatient services	50% coinsurance	100% coinsurance	Pre-authorization required.

Excluded Services & Other Covered Services:

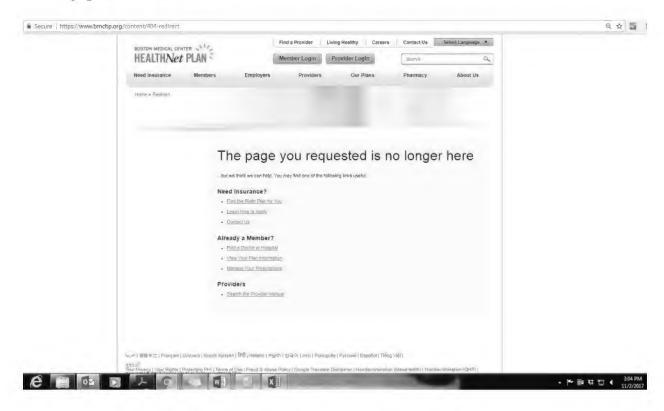
sivices four Fian Generally Does i	ACT COVER (CHECK	your policy or plan document for more informati	IUII a	ind a list of ally other excluded services.)
Acupuncture		Long-term care		Routine foot care
Cosmetic surgery		Non-emergency care when traveling outside the	•	Weight loss programs
 Dental care (Adult) 		U.S.		

Other Covered Services (Limitations may apply to these services. This isn't a complete list. Please see your plan document.)					
Bariatric surgery	Hearing aids	 Private-duty nursing (when medically necessary) 			
Chiropractic care	 Infertility treatment 	Routine eye care			

 Health Alliance Medical Plans, Inc. in Illinois. Screenshots of randomly selected sample plan SBC, HMO 2000 Elite Gold, with no abortion coverage disclosure as of 11/20/17: https://www.healthalliance.org/docs/2018_IL_IND_PUB_SBC_HMO_2000_ELITE_GOLD.pdf

If you have outpatient surgery	Facility fee (e.g., ambulatory surgery center)	10% coinsurance	Not Covered	Preauthorization may be required for certain procedures. Contact customer Service for detailed information.
ww.gv.,	Physician/surgeon fees	10% coinsurance	Not Covered	none
	Office visits	10% coinsurance for routine prenatal care	Not Covered	none
If you are pregnant	Childbirth/delivery professional services	\$200 co-pay / stay	Not Covered	none
	Childbirth/delivery facility services	\$200 co-pay / stay	Not Covered	none
Excluded Services & Otl Services Your <u>Plan</u> Gene		our policy or plan docum	nent for more informati	ion and a list of any other excluded services.)
Acupuncture		Dental Care (Adult)		 Non-Emergency Care When Traveling Outside the U.S.
Cosmetic Surgery(lim	ited) •	Long-Term Care		Weight Loss Programs
Other Covered Services	(Limitations may apply to these	services. This isn't a co	mplete list. Please see	your <u>plan</u> document.)
Bariatric Surgery Chiropractic Care Hearing Aids(Pediatric	c)	Infertility Services Private-Duty Nursing		Routine eye Care(Adult) Routine foot care

4. **A) Boston Medical Center HealthNet Plan** (5 plans in Massachusetts). Initial re-direct page (as of 11/2/2017):



B) Screenshot of Boston Medical Center HealthNet 2018, randomly selected sample plan SBC, ConnectorCare Plan Type 1, with no abortion coverage disclosure as of 11/20/2017:

https://www.bmchp.org/-/media/2e5e808922e64f34aba00e6f9e426639.ashx

	Office visits	No charge for pre-natal or postnatal visits	Not Covered		
If you are pregnant	Childbirth/delivery professional services		Not Covered	Office visits for medical conditions may be subject to cost-sharing.	
Childbirth/delivery facility services	Childbirth/delivery facility services	No Charge	Not Covered		
	Facility fee (e.g. ambulatory			Includes diagnostic colonoscopies and	
If you have outpatient	Facility fee (e.g., ambulatory surgery center)	No Charge	Not Covered	- Includes diagnostic colonoscopies and endoscopies.	
If you have outpatient surgery		No Charge	Not Covered		

 Acupuncture Cosmetic Surgery Early Intervention services for children age 3 and older. Hearing Aids for members over age 21 Long-term care 	Non-Emergency care when traveling outside the U.S Private-duty nursing Routine foot care except for members with Diabetes Dental Care (Adult)	Services beyond any benefit or monetary limit listed in this Summary of Benefits and Coverage Vision Hardware except as described in the Evidence of Coverage. Weight loss programs, except as described in the Evidence of Coverage.
	these services. This isn't a complete list. Please see Dental Services for Cleft Lip/Palate Repair Hearing Aids for Children	

5. Fidelis Care plans in New York. Screenshots of randomly selected sample plan SBC, Fidelis Care Silver, with no abortion coverage disclosure as of 11/21/2017: https://www.fideliscare.org/Portals/0/DocumentLibrary/Products/NY%20State%20of%2 0Health/2018%20Products/SBCSilver2018.pdf

	1	13		
If you have	Facility fee (e.g., ambulatory surgery center)	\$100 copay after deductible	Not covered	Prior authorization is required.
outpatient surgery	Physician/surgeon fees	\$100 copay after	Not covered	Prior authorization required. One copay

^{*} For more information about limitations and exceptions, see the plan or policy document at www.fideliscare.org.

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	Office visits	\$30 copay per visit after deductible	Not covered	None.
If you are pregnant	Childbirth/delivery professional services	\$100 copay per visit after deductible	Not covered	Prior authorization is required.
	Childbirth/delivery facility services	\$1,500 copay per admission after deductible	Not covered	Prior authorization is required.

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			- 1	-
Excluded	Services	& Other	Covered	Services

Services Your Plan Generally Does NOT Cover (Check your policy or plan document for more information and a list of any other excluded services.)

Cosmetic surgery

- · Private duty nursing
- · Long-term care

· Routine foot care

- · Routine dental care (adult)
- · Routine eye care (adult)

Other Covered Services (Limitations may apply to these services. This isn't a complete list. Please see your plan document.)

- · Fitness center reimbursement

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Your Rights to Continue Coverage: There are agencies that can help if you want to continue your coverage after it ends. The contact information for those agencies is:

6. Independent Health plans in New York. Screenshots of randomly selected sample plan SBC, Standard Silver ST OON Dep29, with no abortion coverage disclosure as of

https://www.independenthealth.com/Portals/0/PDFs/Exchange/2018/Standard_Silver_18 029NY1260002-01.pdf

If you have	Facility fee (e.g., ambulatory surgery center)	\$100 copay/visit	40% coinsurance	Authorization may be required
outpatient surgery	Physician/surgeon fees	\$100 copay/visit	40% coinsurance	Authorization may be required
	-	anno / 1 1	marco era	25 5 4 5 5 5 6

		1 2 3*	1	1
If you are pregnant	Prenatal and postnatal care	No charge	40% coinsurance	No charge after the initial diagnosis

Questions: Call 1-800-501-3439 or visit us at www.independenthealth.com.

If you aren't clear about any of the bolded terms used in this form, see the Glossary. You can view the Glossary at www.independenthealth.com or call 1-800-501-3439 to request a copy. 3 of 8

18029NY1260002-01

independent Health.	Standard Silver
Summary of Benefits and Co	verage: What this Plan Covers & What it Costs

Coverage beginning on or after: 01/01/17 Coverage for: All Tier Levels Plan Type: POS

Delivery and all inpatient services	Delivery: \$1,500 copay/admission Physician: \$100 copay/delivery	40% coinsurance	Semi-private room, per admission
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^{*} For more information about limitations and exceptions, see the plan or policy document at www.fideliscare.org

Excluded Services & Other Covered Services:

Acupuncture	 Long-term care 	Routine eye care (Adult)
Cosmetic Surgery	 Non-emergency care when traveling outside the U.S. 	Routine foot care
Dental care (Adult)	Private duty nursing	 Weight loss programs

Other Covered Services (This isn't a complete list. Check your policy or plan document for other covered services and your costs for these services.)

Bariatric surgery
Hearing aids
Chiropractic care
Infertility treatment

7. MVP plans in New York. Screenshots of randomly selected sample plan SBC, "NY MVP Premier Plus HDHP Silver 3, 94" with no abortion coverage disclosure as of 11/21/2017: http://mvpsbc.arvatocim.com/SBCPDFs/FRNY-HMOH-DS1-003-N-94%20(2018)-422015.pdf

If you have outpatient surgery	Facility fee (e.g., ambulatory surgery center)	\$50 copay/day	Not covered	Deductible applies
	Physician/surgeon fees	\$40 copay/procedure	Not covered	Deductible applies
		PPD warmer & duck	een aaaaa dada	Padinthia section assessment if admitted
If you are pregnant	Office visits	No charge	Not covered	Cost sharing does not apply to certain preventive services. Depending on the type services, a copay, coinsurance, and/or deductible may apply. Maternity care may include tests and services described elsewhere in the SBC (i.e. ultrasound).
	Childbirth/delivery professional services	\$40 copay/delivery	Not covered	
	Childbirth/delivery facility services	\$100 copay/stay	Not covered	

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Children's Dental Check-up	
Cosmetic Surgery	
Dental Care (Adult)	
Long-Term Care	
Non-Emergency care when traveling outside the U.S	
Private-Duty Nursing	
Routine Eye Care (Adult)	
Routine Foot Care	

Other Covered Services (Limitations may apply to these services. This isn't a complete list. Please see your plan document.)	
Acupuncture	
Bariatric Surgery	
Chiropractic Care	
Hearing Aids	
Infertility Treatment	
Weight Loss Programs	

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8. Sendero 2018 Plans in Texas. Screenshots of randomly selected sample plan SBC, Total Standard (Gold), with no abortion coverage disclosure as of 11/21/17: http://senderohealth.com/files/2018/71837TX001000201_Total_Std.pdf

If you have outpatient surgery	Facility fee (e.g., ambulatory surgery center)	\$150 <u>copay/per surgery</u>	Not covered	Certain services may require preauthorization. If preauthorization is not obtained you may be responsible for
* For more information ab	out limitations and exceptions, s	ee the plan or policy documer	it at www.senderohealth	h.com. 2 of 1

If you are pregnant	Office visits	\$10 copay/office visit Deductible does not apply.	Not covered	Copay per initial visit and delivery. No charge for subsequent prenatal visits with the same
	Childbirth/delivery professional services	No charge	Not covered	<u>provider</u> or <u>provider</u> group per pregnancy. Depending on the type of services,
ii you are pregnant	Childbirth/delivery facility services	20% coinsurance/per delivery	Not covered	<u>coinsurance</u> or <u>copay</u> may apply. Maternity care does not include tests and services described elsewhere in the SBC (i.e. ultrasound).

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Excluded Services & Other Covered Services:

Services Your Plan Generally Does NOT Cover (Check your policy or plan document for more information and a list of any other excluded services.)

- Acupuncture
- Bariatric surgeryCosmetic surgery
- · Dental care (Adult)
- Long-term care

- Non-emergency care when traveling outside
- the U.S. Private-duty nursing
- Weight loss programs

Other Covered Services (Limitations may apply to these services. This isn't a complete list. Please see your plan document.)

- Chiropractic care is combined with rehabilitation (PT, OT, ST, and Chiropractic Services)
- Hearing aids are limited to 1 per ear every 3 years.
- Infertility treatment is limited to diagnostic services only. Treatment to correct the infertility condition and services such as in vitro fertilization and artificial insemination are excluded from coverage.
- Routine eye care (Adult) is limited to 1 eye exam per calendar year.
- Routine foot care is limited to foot care in connection with diabetes, circulatory disorders of the lower extremities, peripheral vascular disease, peripheral neuropathy, or chronic arterial or venous insufficiency.

Example of a Company That Updated SBCs Previously Silent on Abortion Coverage:

 A. ConnectiCare Benefits plans in Connecticut (7 of 8 plan SBCs did not have abortion coverage information, as of 11/3/2017). Screenshots of randomly selected Passage Silver Alternative PCP POS:

CBI POS76962CT0010022 01SBC

If you have outpatient surgery	Facility fee (e.g., ambulatory surgery center)	\$500 <u>copayment/visit</u> after INET plan <u>deductible</u> is met	50% <u>coinsurance</u> after OON plan <u>deductible</u> is met	Preauthorization is required. If you don't get preauthorization, you may be responsible for the total cost of the service or benefits may be reduced by the lesser of \$500 or 50%.	
	Physician/surgeon fees	0% <u>coinsurance</u> after INET plan <u>deductible</u> is met	50% <u>coinsurance</u> after OON plan <u>deductible</u> is met	None	
If you are pregnant	Office visits	No charge for prenatal and postnatal care	50% <u>coinsurance</u> after OON plan <u>deductible</u> is met	Cost sharing does not apply to certain preventive services. Depending on the type of services, coinsurance may apply Maternity care may include tests and	
	Childbirth/delivery professional services	0% <u>coinsurance</u> after INET plan <u>deductible</u> is met	50% <u>coinsurance</u> after OON plan <u>deductible</u> is met		
	Childbirth/delivery facility services	\$500 copayment/day up to a maximum of \$2,000 per admission after INET plan deductible is met	50% <u>coinsurance</u> after OON plan <u>deductible</u> is met	services described elsewhere in the SB (i.e. ultrasound).	

Excluded Services & Other Covered Services:

Services Your Plan Generally Does NOT Cover (Check your policy or plan document for more information and a list of any other excluded services.)

- Acupuncture
- Bariatric surgery
- Cosmetic surgery
- Dental Care Adult

- Long Term Care
- Non-emergency care when traveling outside the
- · Private-duty nursing

- · Routine foot care
- Routine hearing tests
- · Weight loss programs

Other Covered Services (Limitations may apply to these services. This isn't a complete list. Please see your plan document.)

- Chiropractic Care
- Hearing aids (may be covered with limitations)
- Infertility treatment

Routine eye care

B. Updated – Same 2018 ConnectiCare Benefits plan in Connecticut, Passage Silver Alternative PCP POS, as of 11/21/17 (Updated SBCs do have abortion information):

Chiropractic Care

https://www.connecticare.com/globalfiles/sbc/2018/en-us/PassageSilverAltPOSSBC.pdf

CBI_POS76962CT0010022_01SBC

Excluded Services & Other Covered Services:

Bariatric surgery Cosmetic surgery Dental Care - Adult	 Long Term Care Non-emergency care when traveling outside the U.S. Private-duty nursing 	Routine foot care Routine hearing tests Weight loss programs
 Acupuncture coverage is limited to pai 	y apply to these services. This isn't a complete list. Please see	your plan document.) Routine eye care
management Chiropractic Care	Infertility treatment	 Termination of pregnancy/abortion

 From:
 Stannard, Paula (HHS/IOS)

 Sent:
 20 Sep 2017 19:54:13 +0000

To: Autumn Christensen

Subject: RE: CMS/PPFA letter to the President

Autumn -

Thanks for the head's up.

Paula

From: Autumn Christensen [mailto:achristensen@sba-list.org]

Sent: Wednesday, September 20, 2017 10:09 AM

To: Stannard, Paula (HHS/IOS)

Subject: CMS/PPFA letter to the President

Hi Paula,

We dropped this in the mail late yesterday. It is a letter from 132 state legislators in 27 different states urging the President to direct HHS and CMS to rescind the current guidance that requires states to reimburse abortion providers through Medicaid, and instead issue guidance giving states flexibility to stop funding abortionists in their state Medicaid program.

The letter will get distributed more broadly later this week, but I wanted you to have a heads up before then.

Autumn Christensen Policy Director Susan B. Anthony List